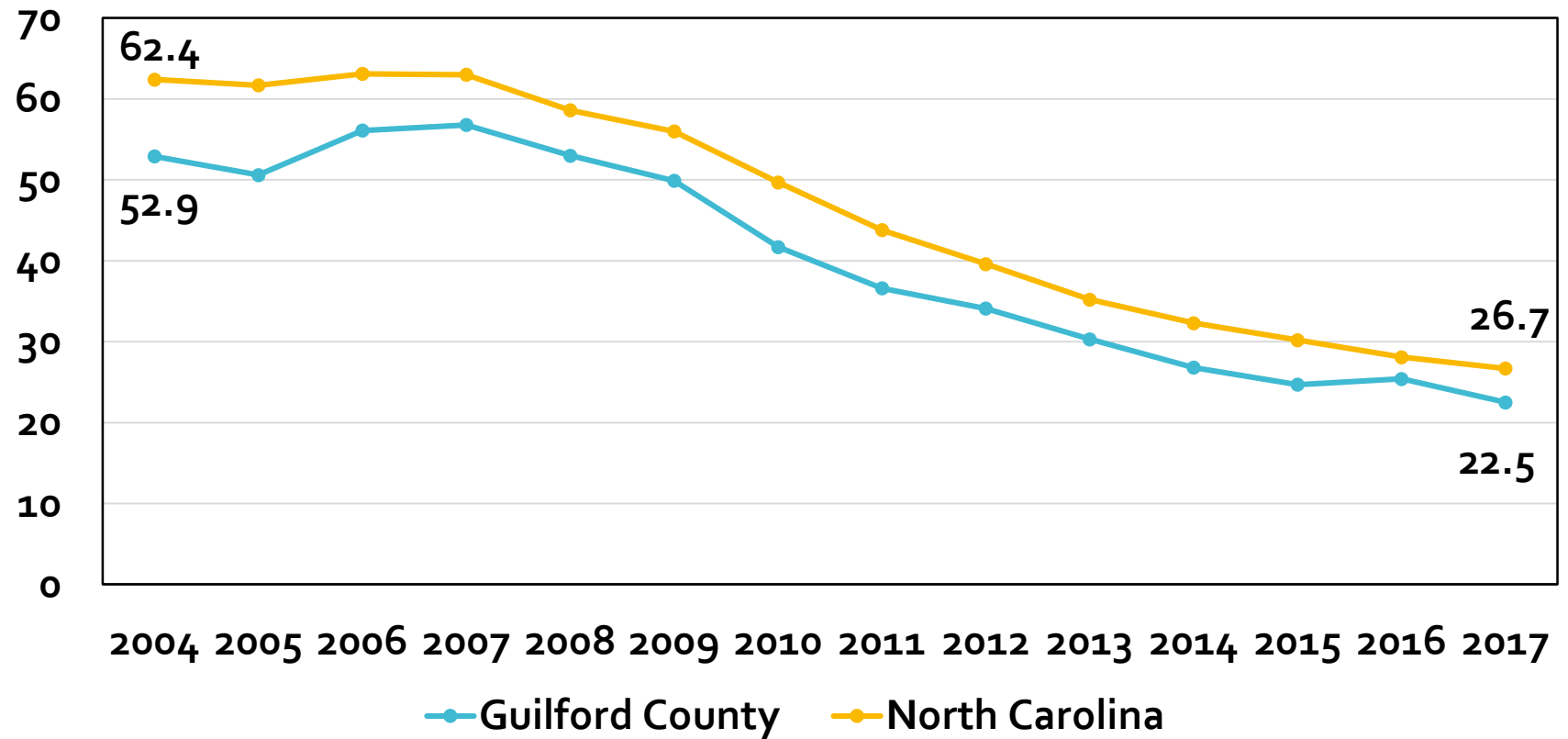


Pregnancy and Birth in Guilford County

2019 Community Health Assessment
Appendix C

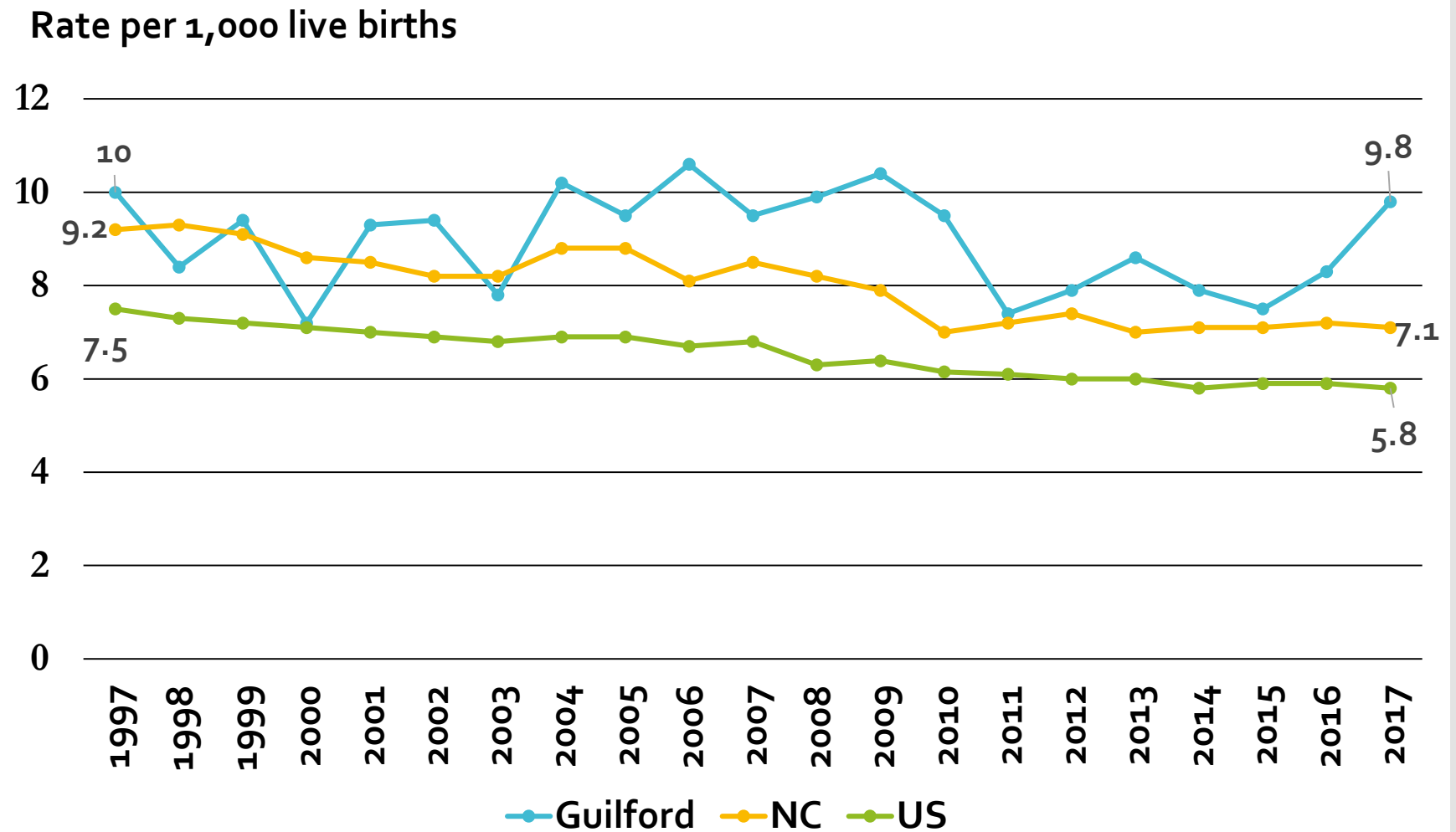
Teen Pregnancy Rates, Ages 15-19 Guilford County and North Carolina 2004-2017

Rate per 1,000 Females Ages 15-19



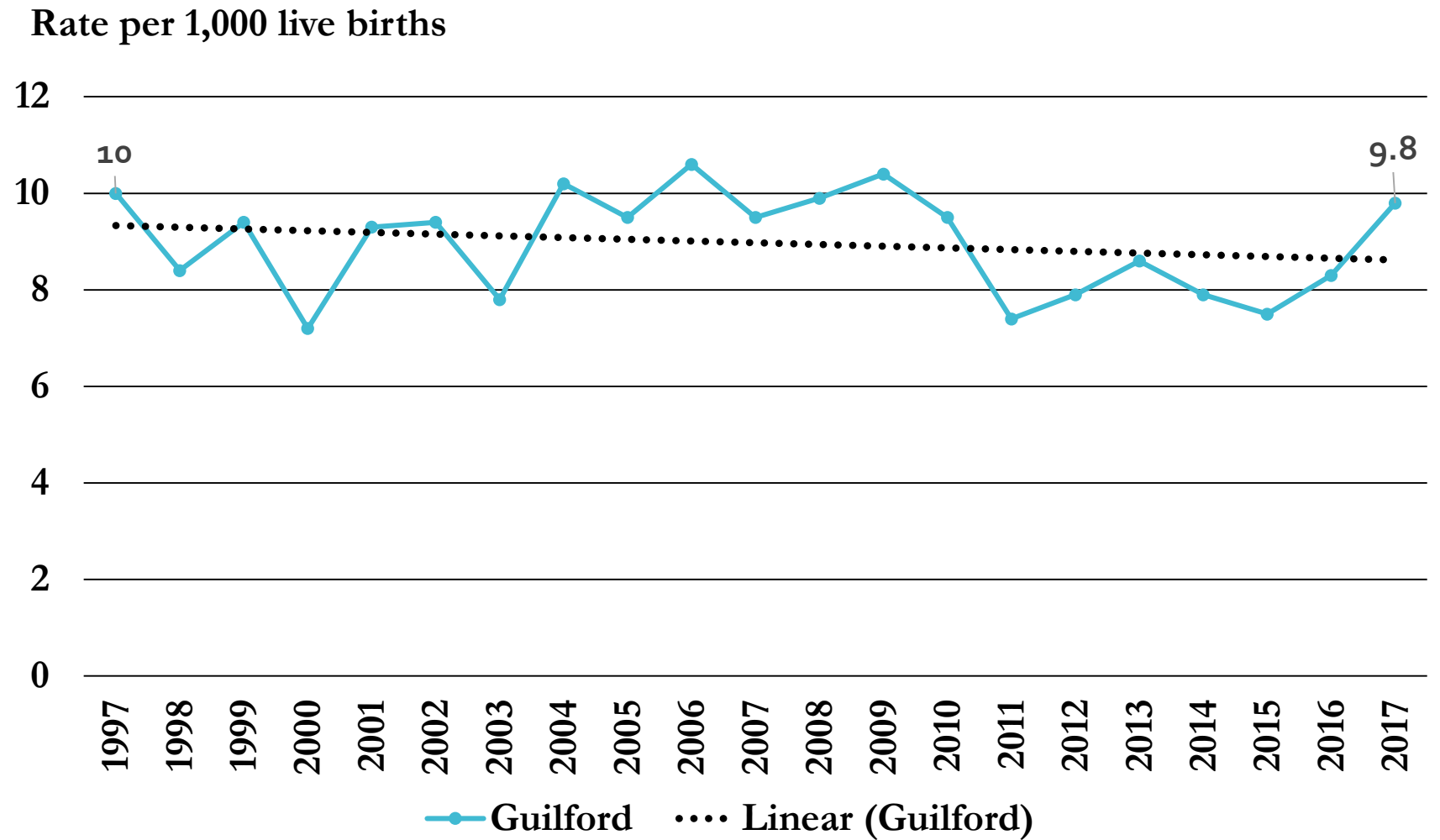
Source: NC State Center for Health Statistics.
Chart prepared by the GCDHHS, Division of Public Health.

Infant Mortality Rate, 1997-2017 Guilford County, North Carolina and United States



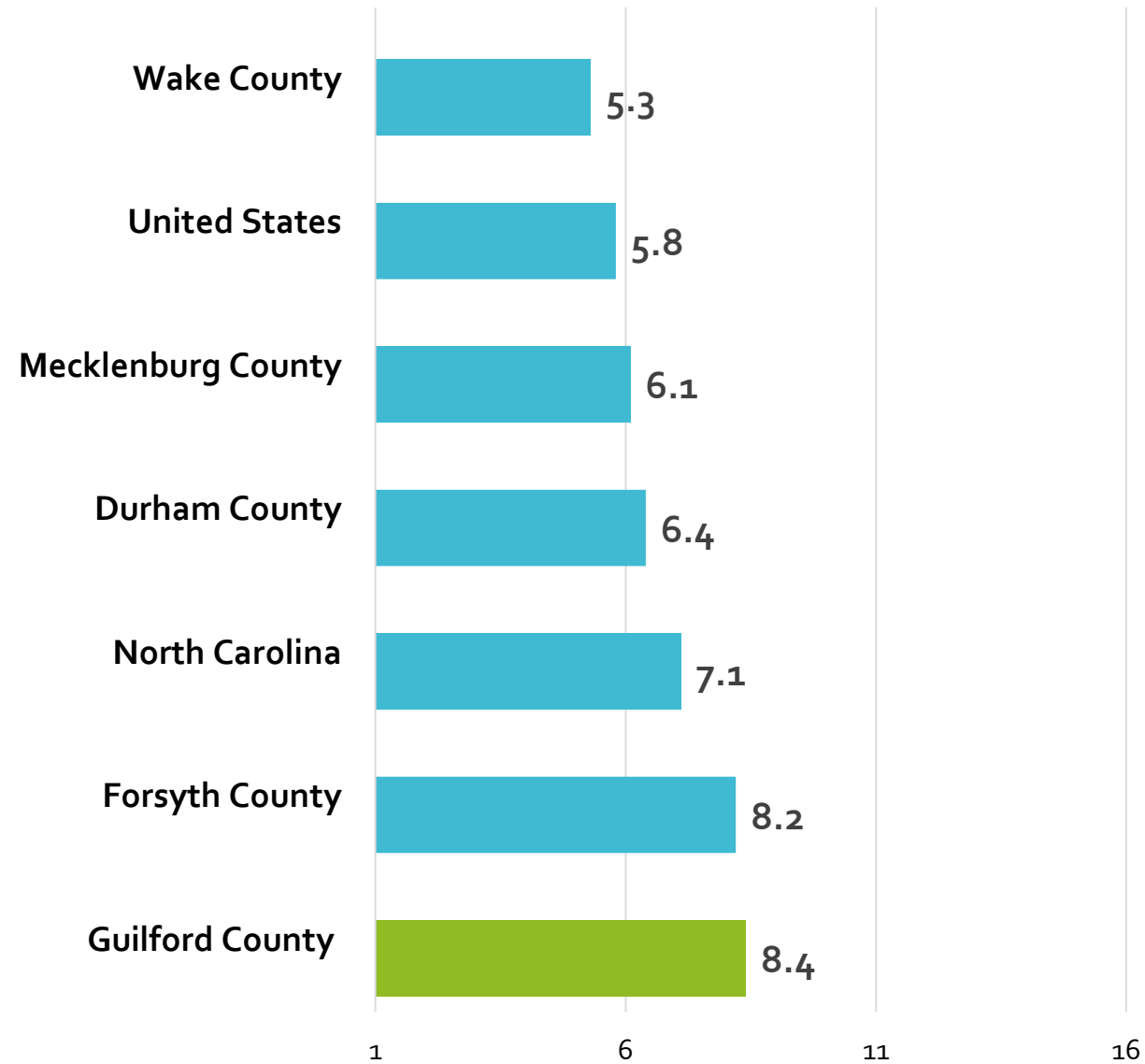
Source: Data provided by the NC Center for Health Statistics, National Center for Health Statistics.
Chart prepared by the GCDHHS, Division of Public Health.

Infant Mortality Rate, 1997-2017 Guilford County, North Carolina and United States



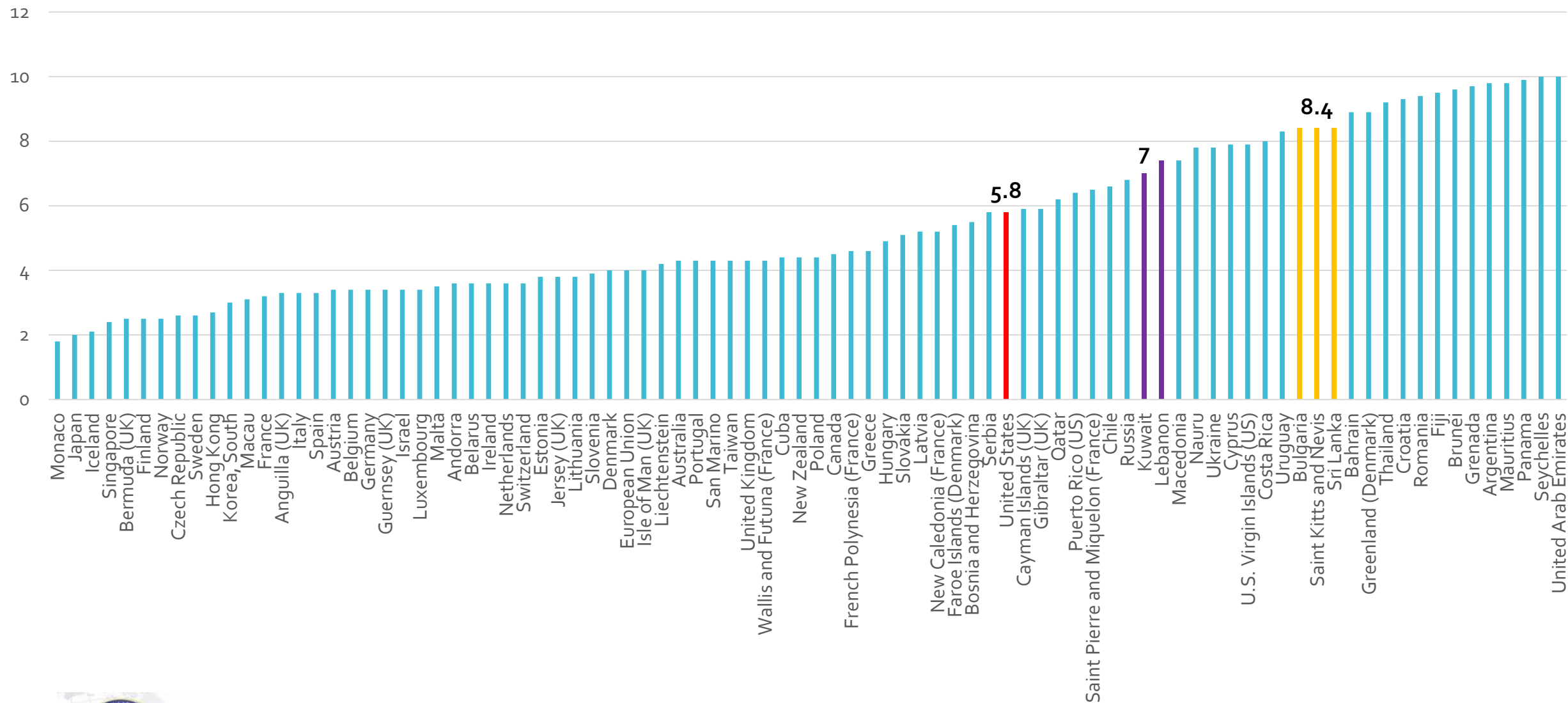
Source: Data provided by the NC Center for Health Statistics, National Center for Health Statistics.
Chart prepared by the GCDHHS, Division of Public Health.

Infant Mortality 5-year Rates (per 1000 Live Births) by county



Source: SCHS, Databook, 2013-2017 ; Note, US data for 2017 only.
Chart prepared by the GCDHHS, Division of Public Health.

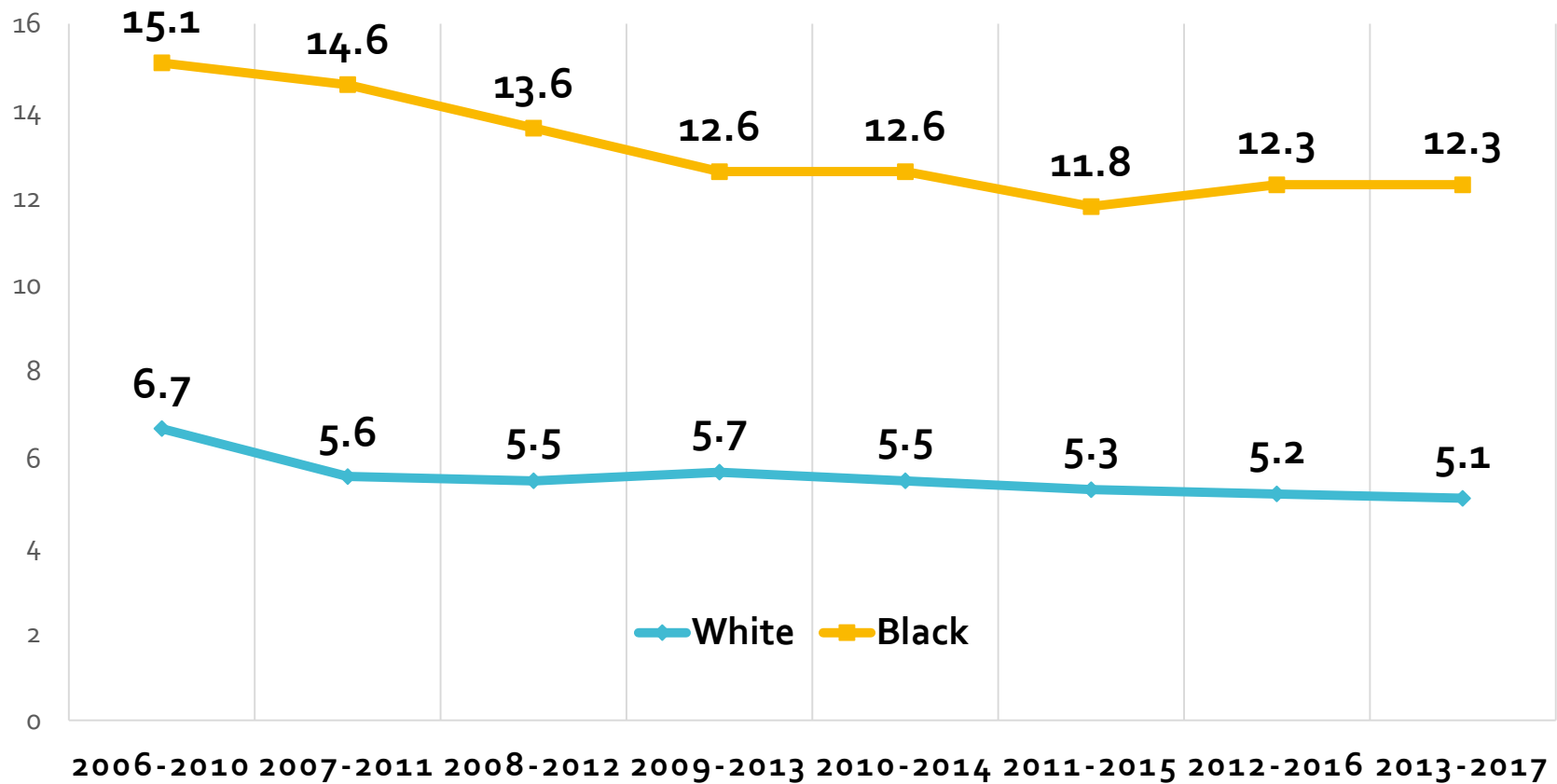
Infant Mortality Rate, Rank by County or Territory, 2017



CENTRAL
INTELLIGENCE
AGENCY

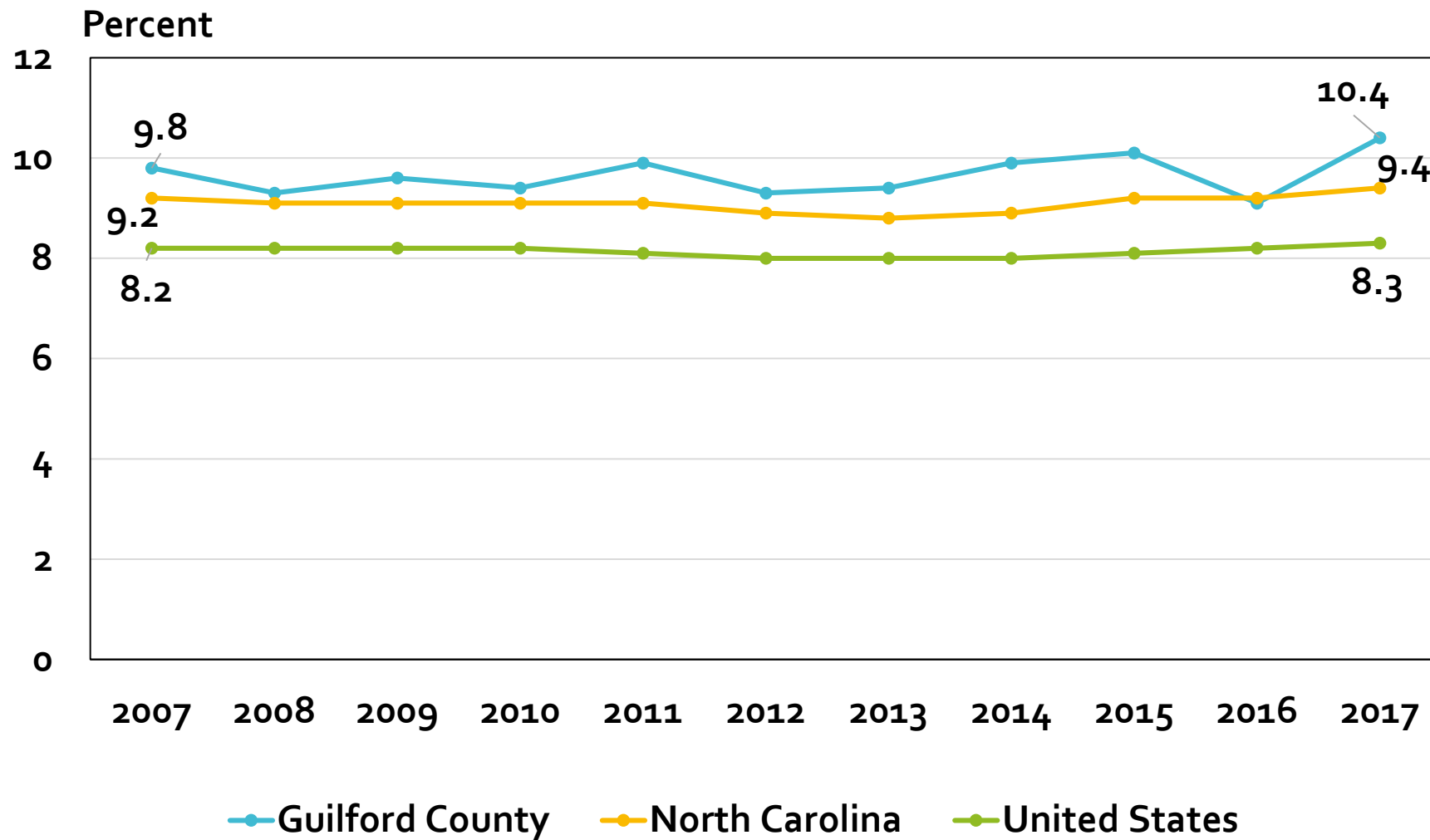
“This rate is often used as an indicator of the level of health in a country”—CIA World Factbook

Rolling Five-Year Infant Mortality Rates by Race, Guilford County, 2006-2017



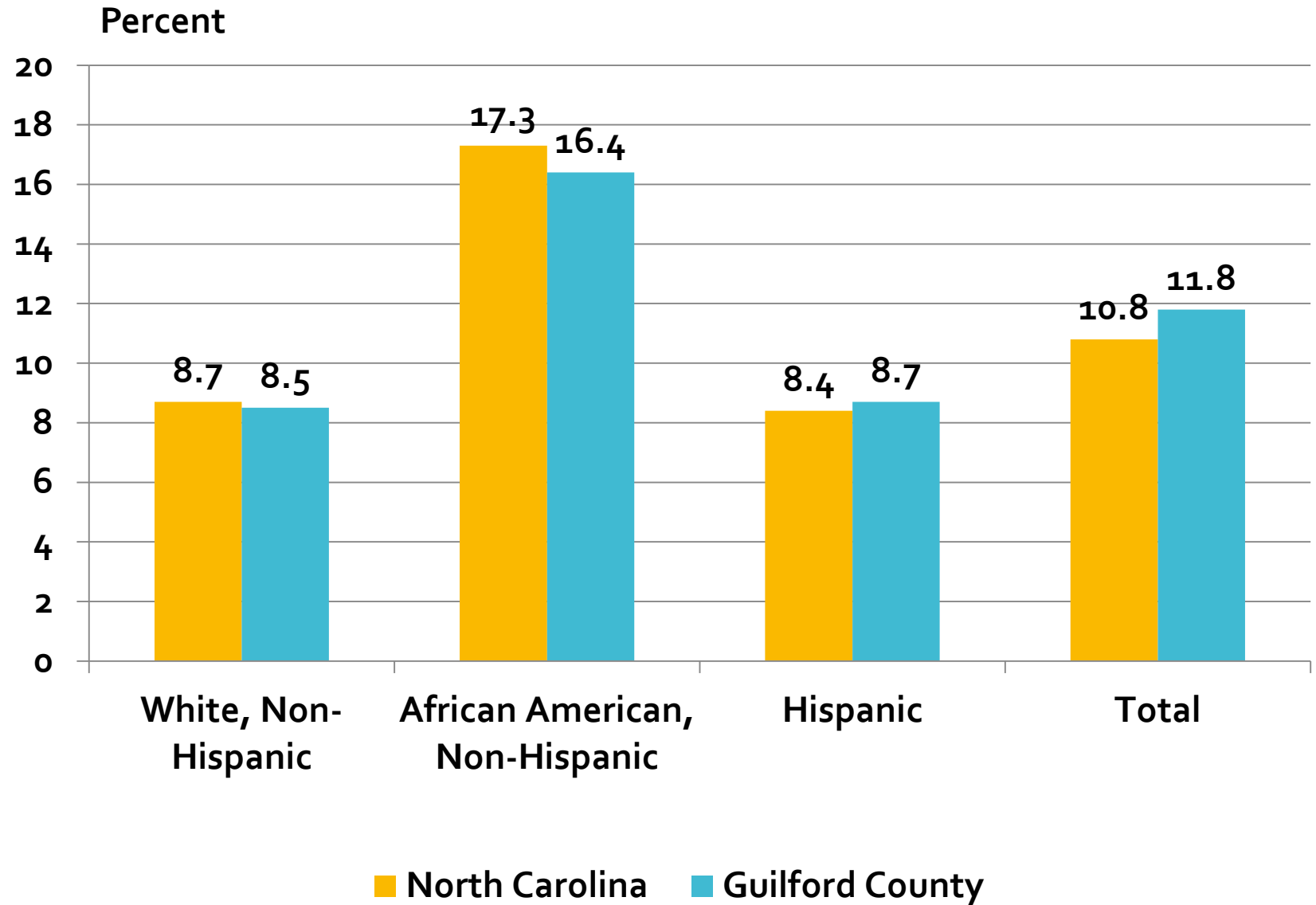
Source: Data provided by the NC Center for Health Statistics, National Center for Health Statistics.
Chart prepared by the GCDHHS, Division of Public Health.

Percent of Births Low Birthweight 2007-2017



Source: Data provided by the NC Center for Health Statistics.
Chart prepared by the GCDHHS, Division of Public Health.

Percentage of Births Low Birthweight, 2013-2017



Source: County Health Databook, NC State Center for Health Statistics.
Chart prepared by the GCDHHS, Division of Public Health.

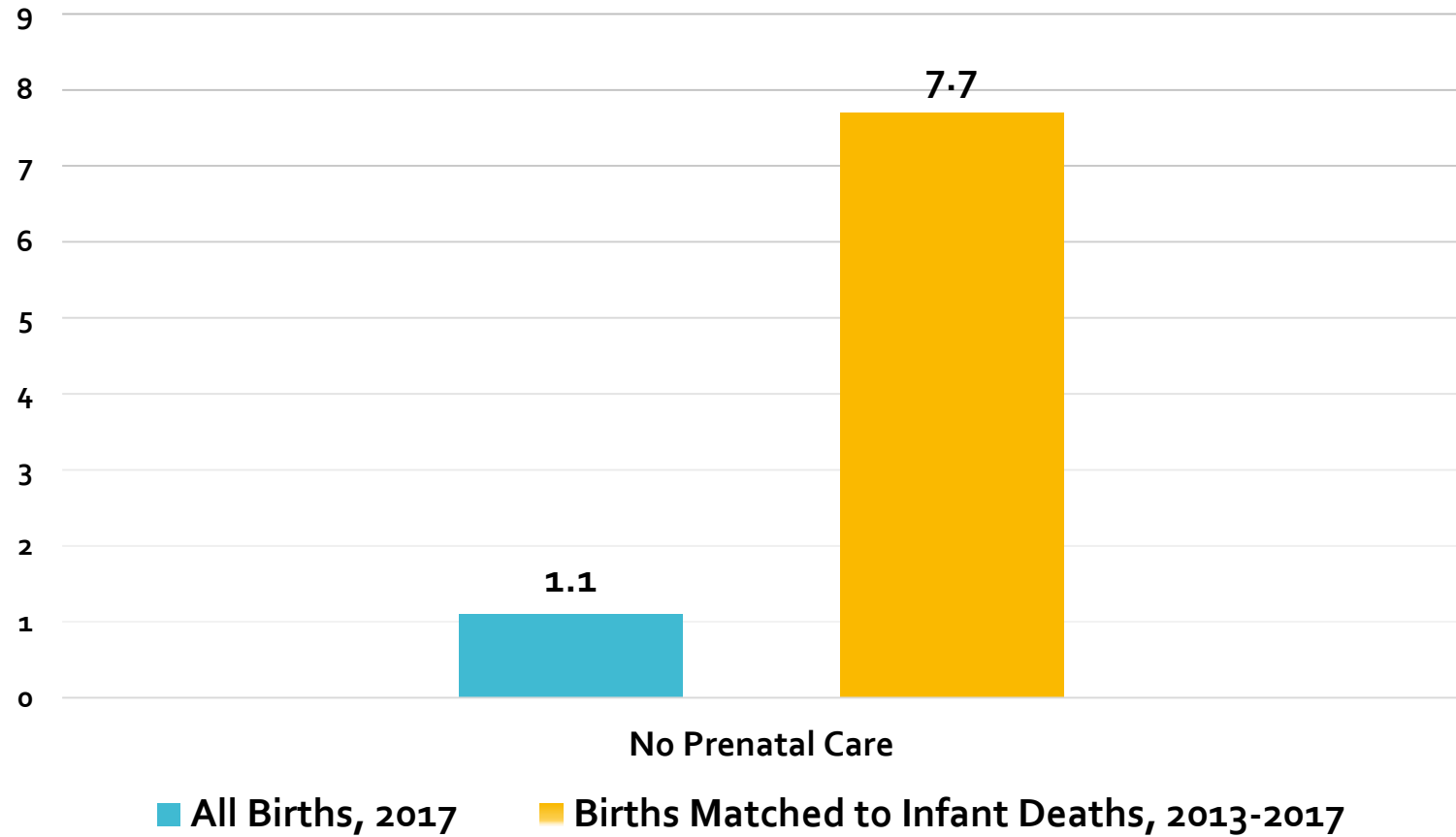


Characteristics of Infant Deaths

Matched Birth, Death Records

Prenatal Care

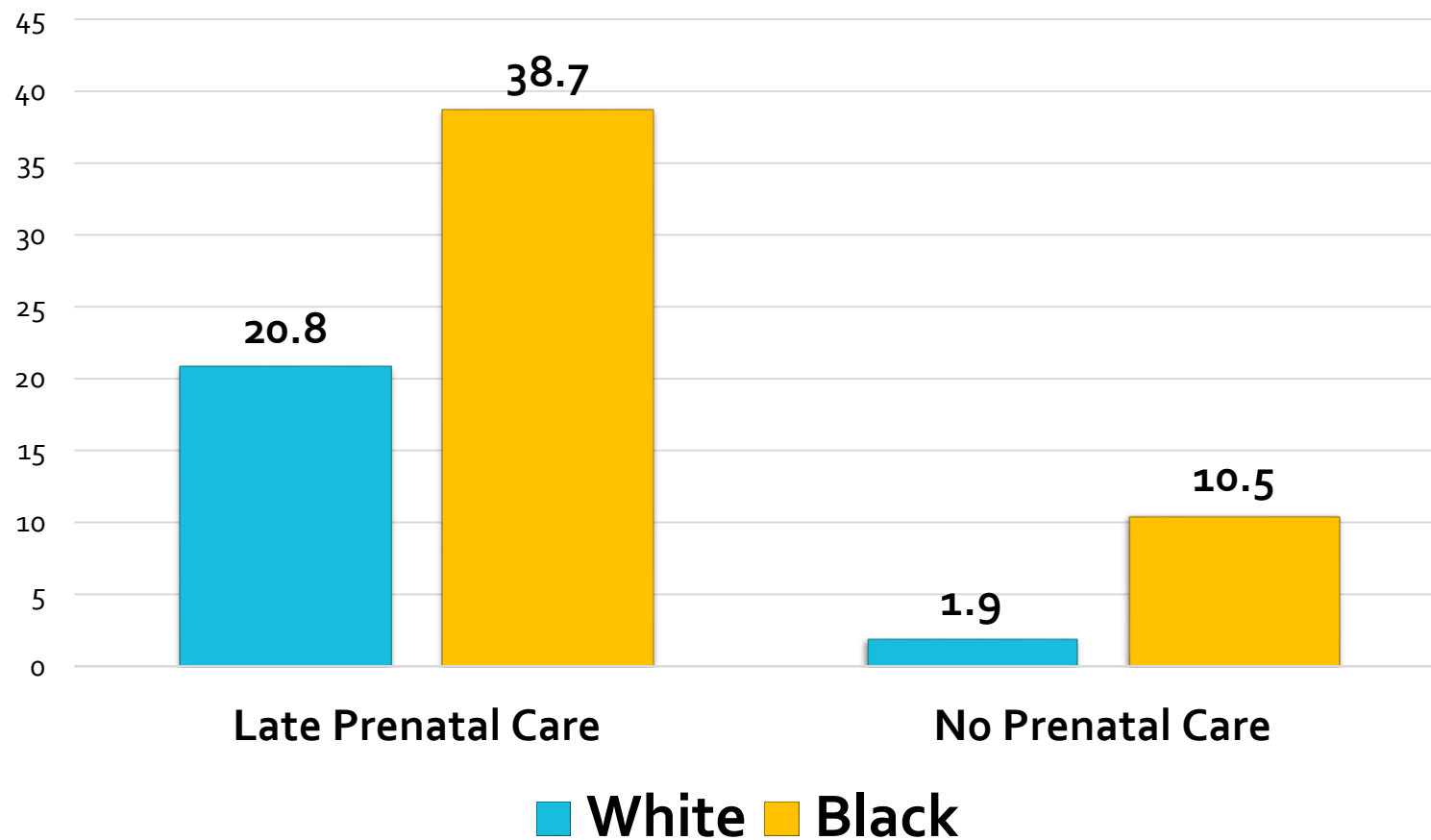
PERCENT OF MOTHERS RECEIVING NO PRENATAL CARE



Source: NC State Center for Health Statistics.
Chart prepared by the GCDHHS, Division of Public Health.

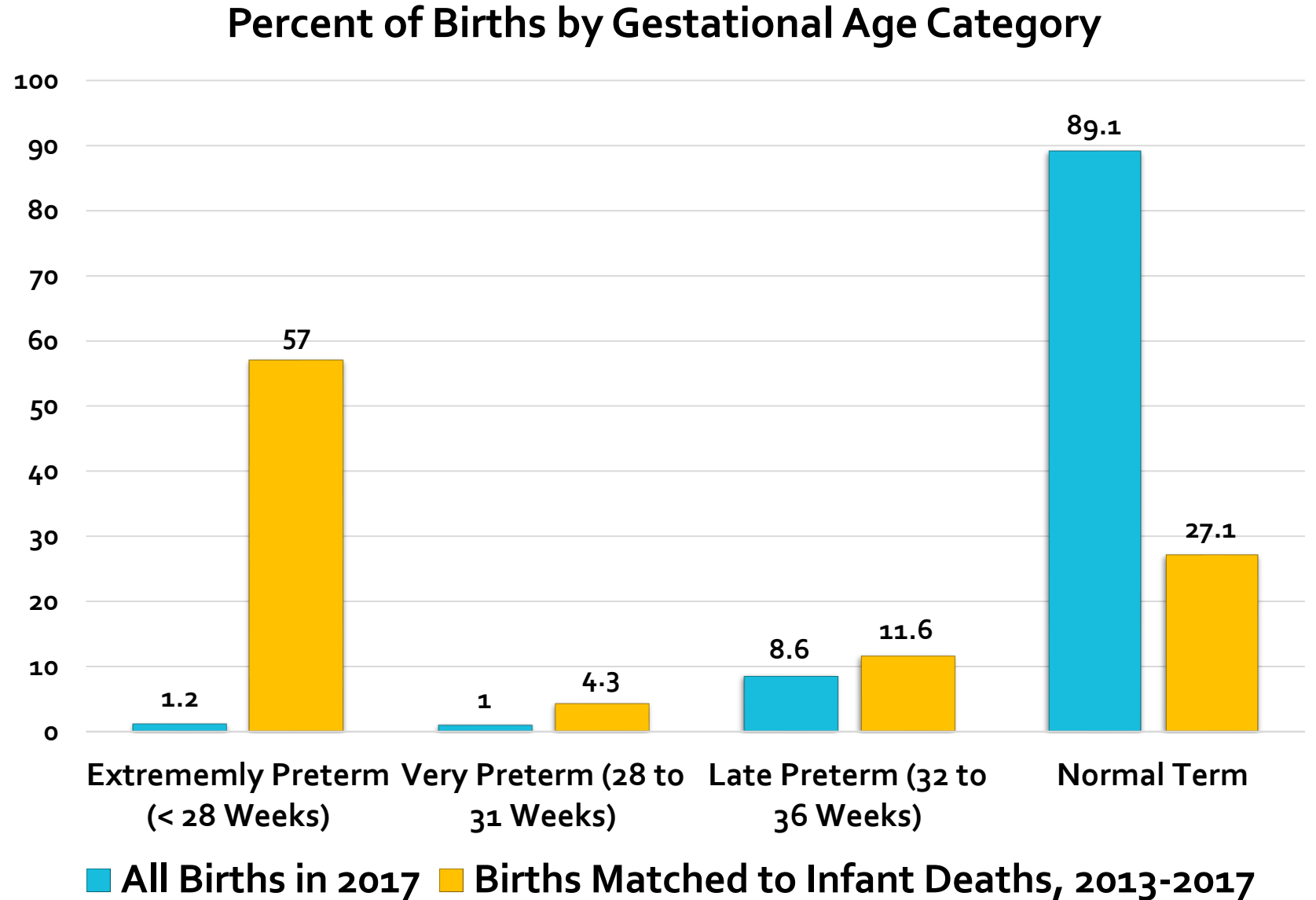
Prenatal Care

Percent of Mothers with Late or No Prenatal Care, by Race
Matched Records, 2014-2017 Infant Deaths



Source: NC State Center for Health Statistics.
Chart prepared by the GCDHHS, Division of Public Health.

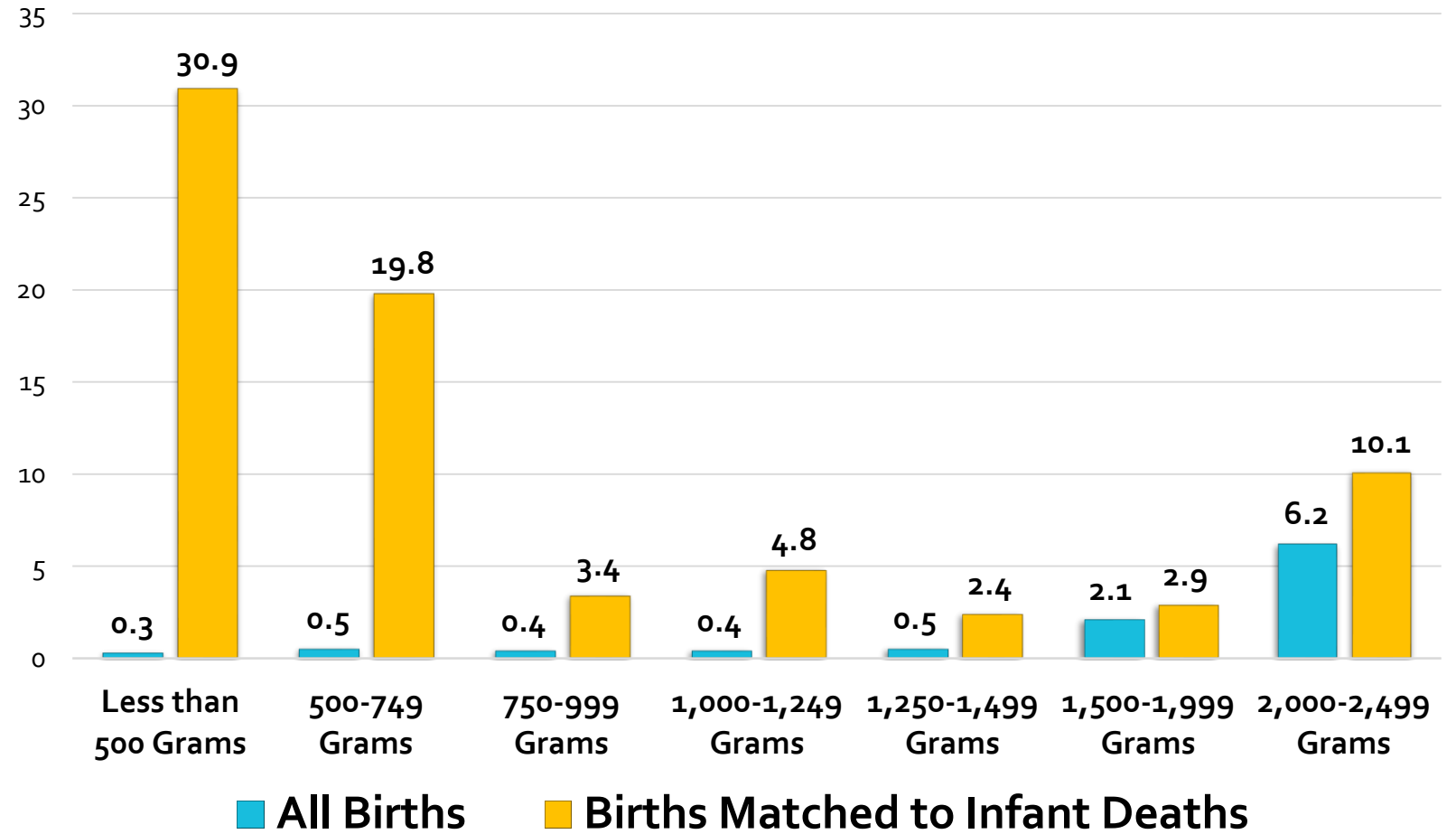
Gestational Age: Prematurity



Source: NC State Center for Health Statistics.
Chart prepared by the GCDHHS, Division of Public Health.

Low Birthweight

Percent of Births by Low Birth Weight Category



Source: NC State Center for Health Statistics.
Chart prepared by the GCDHHS, Division of Public Health.

Birthweight Distribution or Birthweight-specific Mortality Rates?

Guilford County Deaths 2014-2017				
Black/African-American				
Birthweight	Births	Deaths	Birth Distribution	Mortality Rate
200-499	46	40	0.005	869.565
500-749	69	28	0.007	405.797
750-999	58	4	0.006	68.966
1,000-1,249	66	6	0.007	90.909
1,250-1,499	81	3	0.008	37.037
1,500-1,999	276	4	0.027	14.493
2,000-2,499	787	11	0.078	13.977
2,500-6,499	8714	24	0.863	2.754
Total	10097	120	1.000	11.885
White				
Birthweight	Births	Deaths	Birth Distribution	Mortality Rate
200-499	21	16	0.002	761.905
500-749	13	6	0.001	461.538
750-999	24	2	0.002	83.333
1,000-1,249	28	3	0.003	107.143
1,250-1,499	35	1	0.004	28.571
1,500-1,999	137	1	0.014	7.299
2,000-2,499	417	9	0.042	21.583
2,500-6,499	9319	14	0.932	1.502
Total	9994	52	1.000	5.203

Source: NC State Center for Health Statistics.
 Chart prepared by the GCDHHS, Division of Public Health.

Birthweight Distribution or Birthweight-specific Mortality Rates?

	% Due to differences in Birthweight Distribution	% due to differences in Birthweight Specific Mortality Rates
200-499	0.300	0.054
500-749	0.359	-0.034
750-999	0.038	-0.009
1,000-1,249	0.055	-0.011
1,250-1,499	0.022	0.007
1,500-1,999	0.022	0.022
2,000-2,499	0.096	-0.068
2,500-6,499	-0.022	0.168
Total	0.871	0.129

Source: NC State Center for Health Statistics.
Chart prepared by the GCDHHS, Division of Public Health.

Conclusions and Questions

Conclusions:

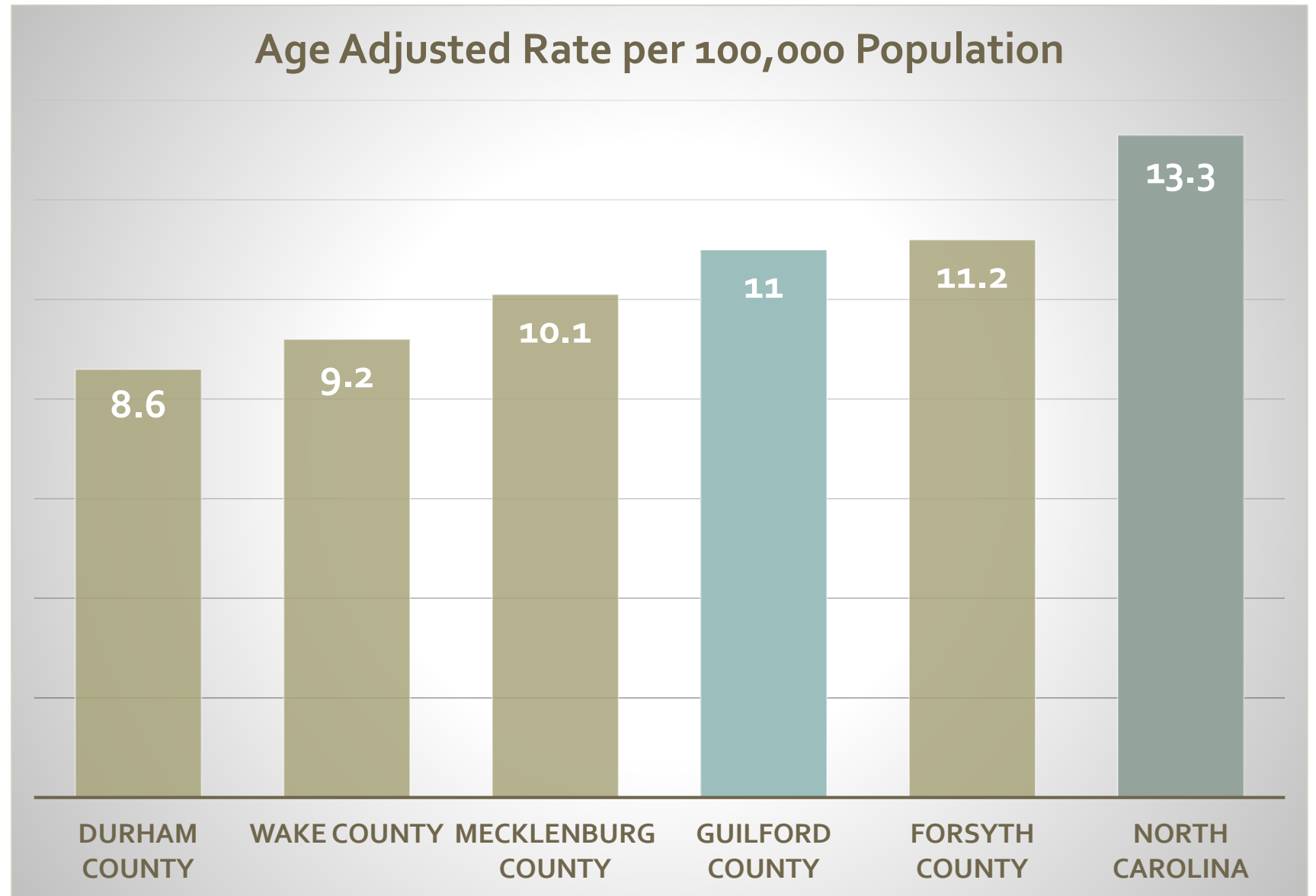
- Very little improvement in infant mortality over 20 years
- Persistent, large racial disparity in infant mortality
- Question: What are key issues in reducing disparities and improving birth outcomes?

1. Social determinants of health?
2. Toxic stress?
3. Pre-conceptional health?
4. Access to care issues?
5. Racism?

Mental Health in Guilford County

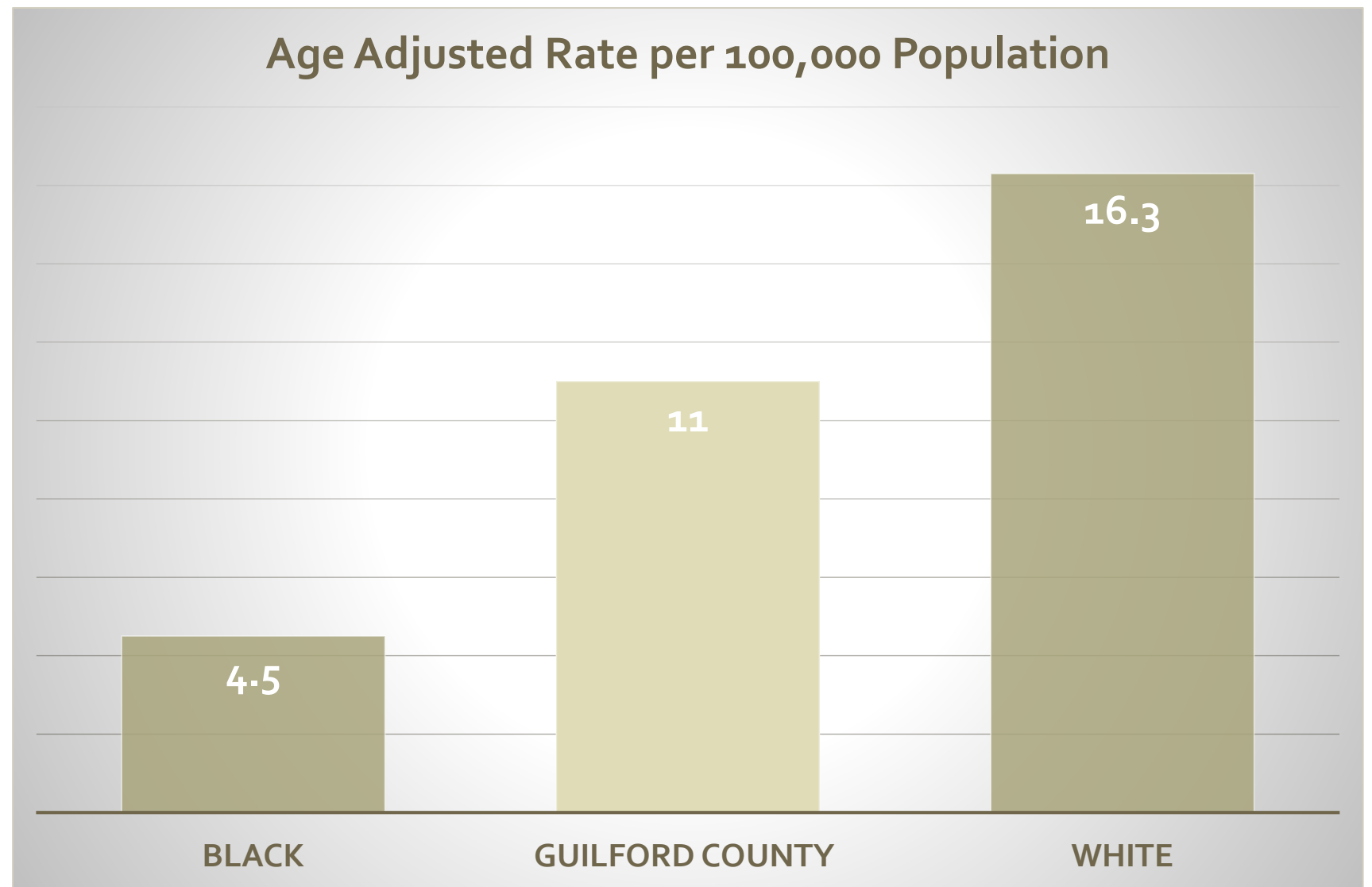
Guilford County 2019 Community Health Assessment
Appendix D

Suicide mortality rates Guilford, NC and peer counties



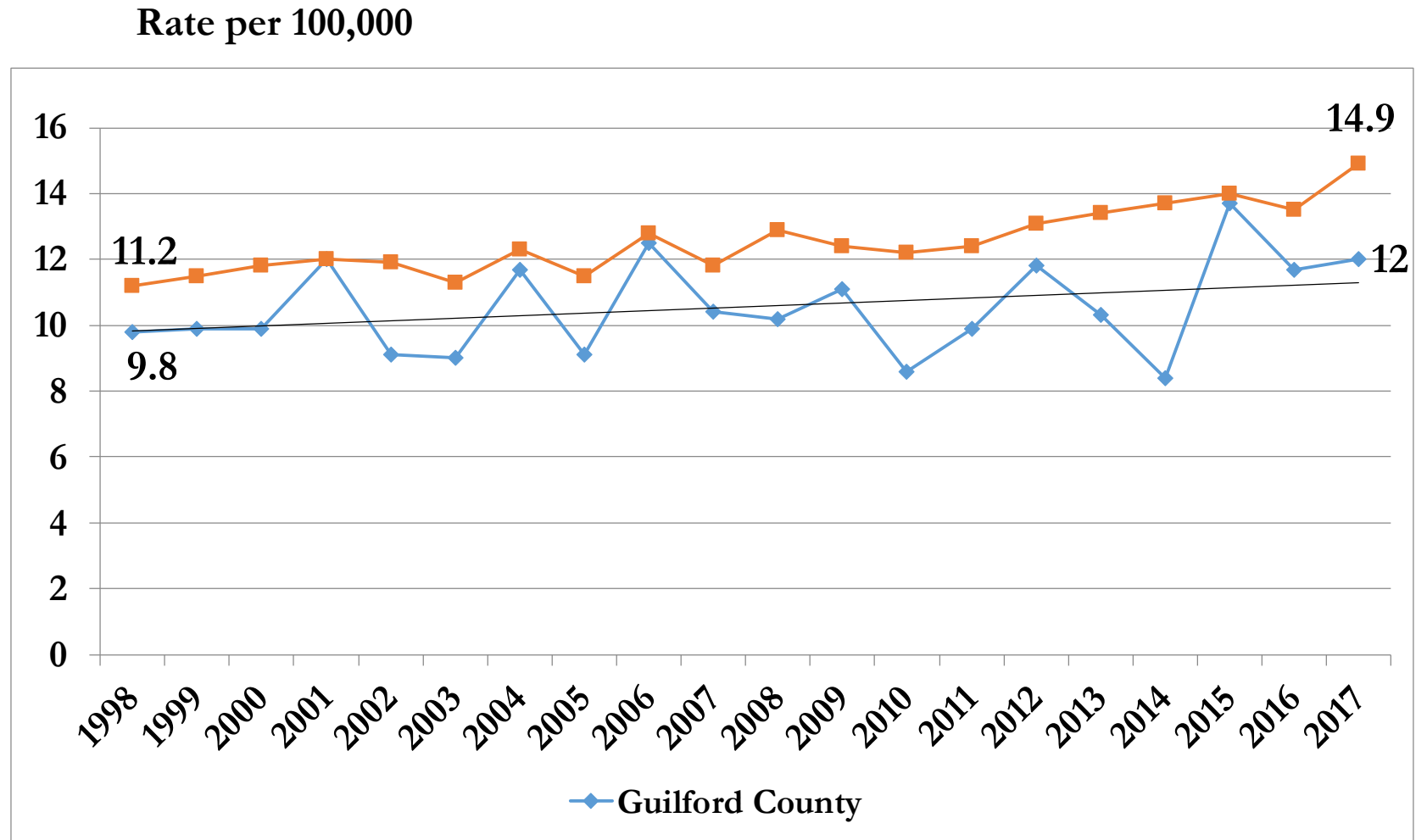
Source: County Health Dtabook, NC State Center for Health Statistics

Suicide mortality rates, by race



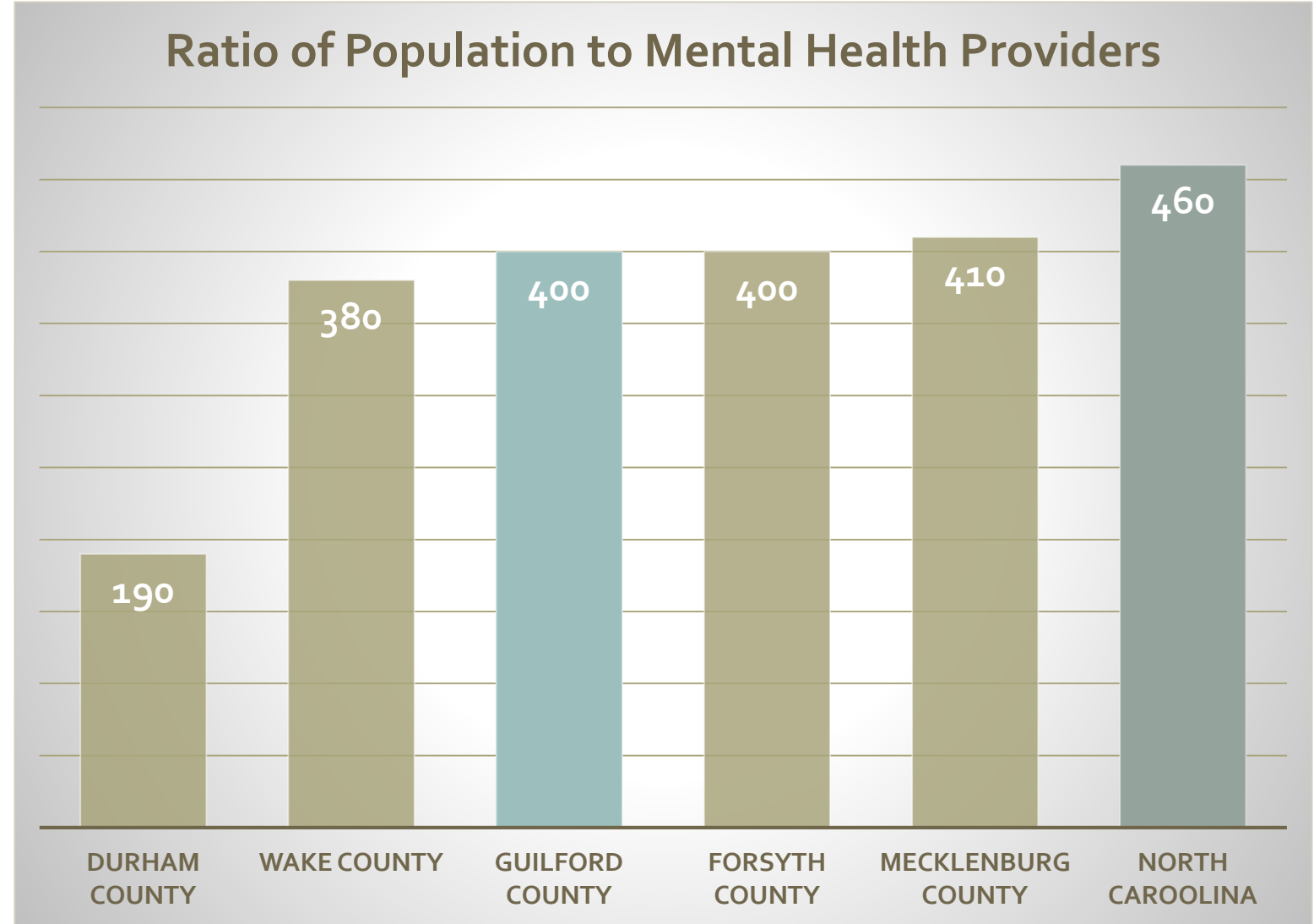
Source: County Health Databook, NC State Center for Health Statistics

Suicide Mortality, Guilford County and NC, 1998-2017



Source: Data provided by the NC Center for Health Statistics.

Mental Health providers by county



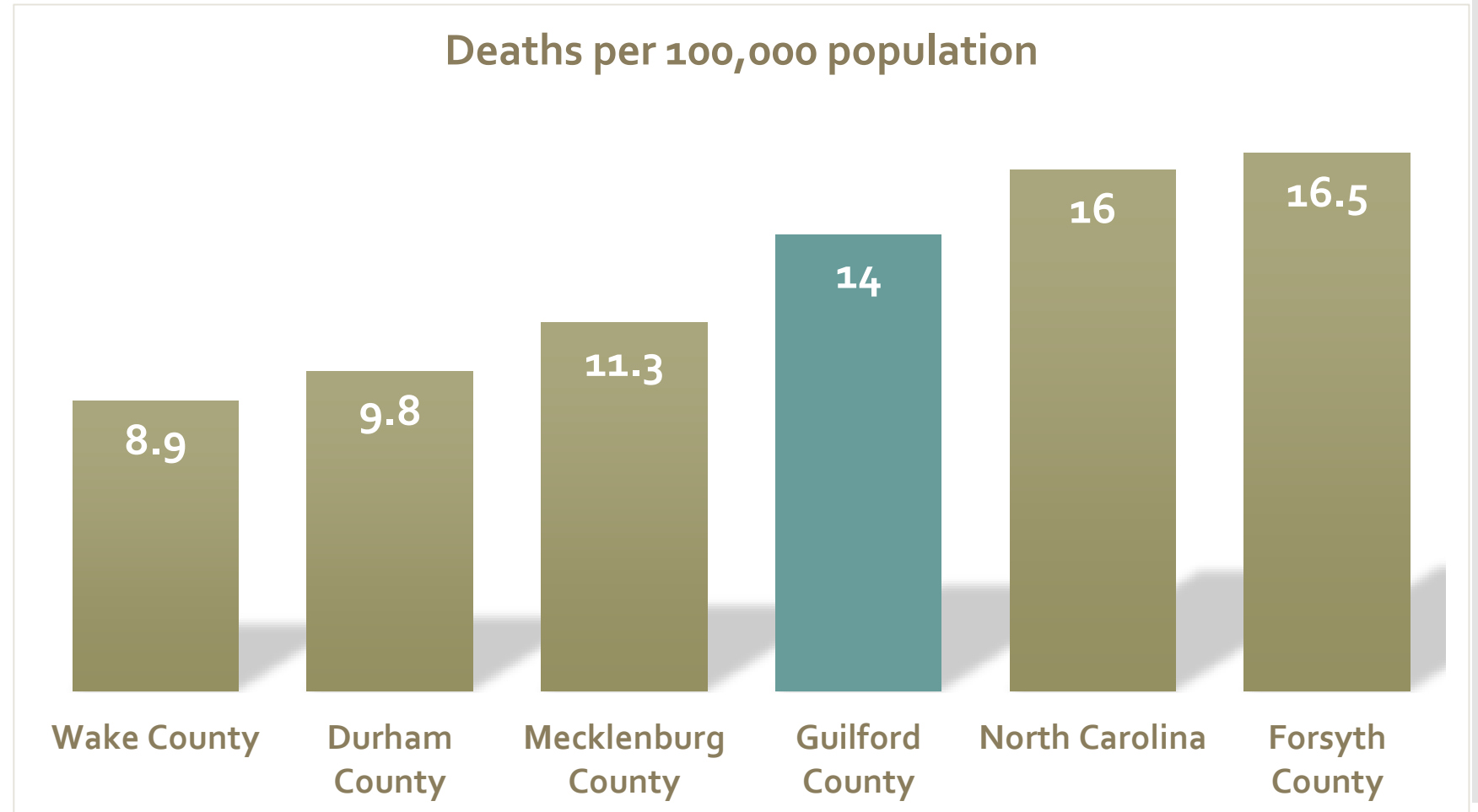
Opioid Dependence and Overdose

2019 Guilford County Community Health
Assessment

Data for Opioid Issues

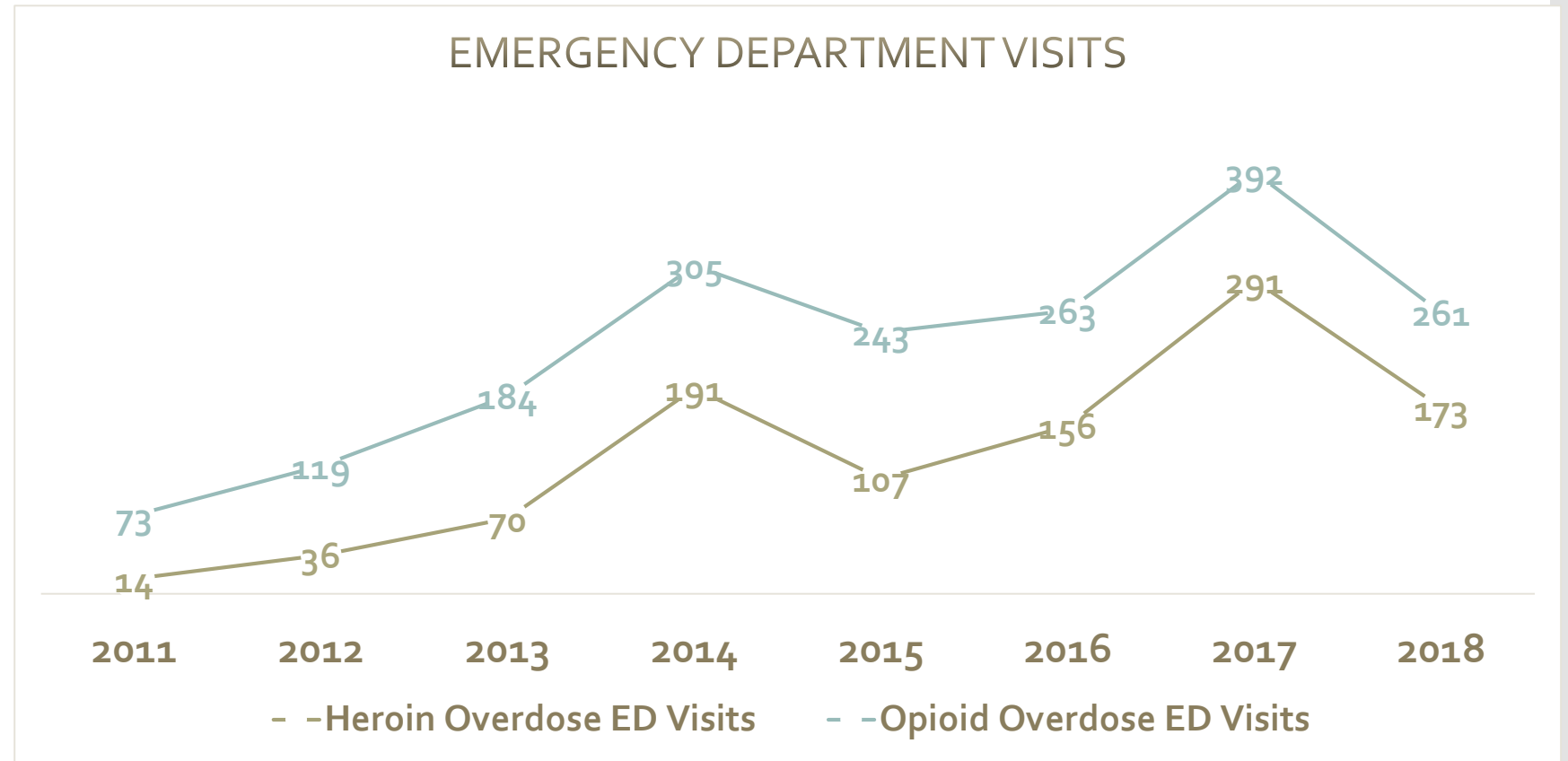
- Unintentional Poisoning Mortality Rates
- Opioid Mortality Rates
- Trends in opioid Emergency Department Visits
- Trends in Heroin-related Emergency Department Visits

Mortality due to Unintentional Drug Poisoning Guilford County, Peer Counties and NC



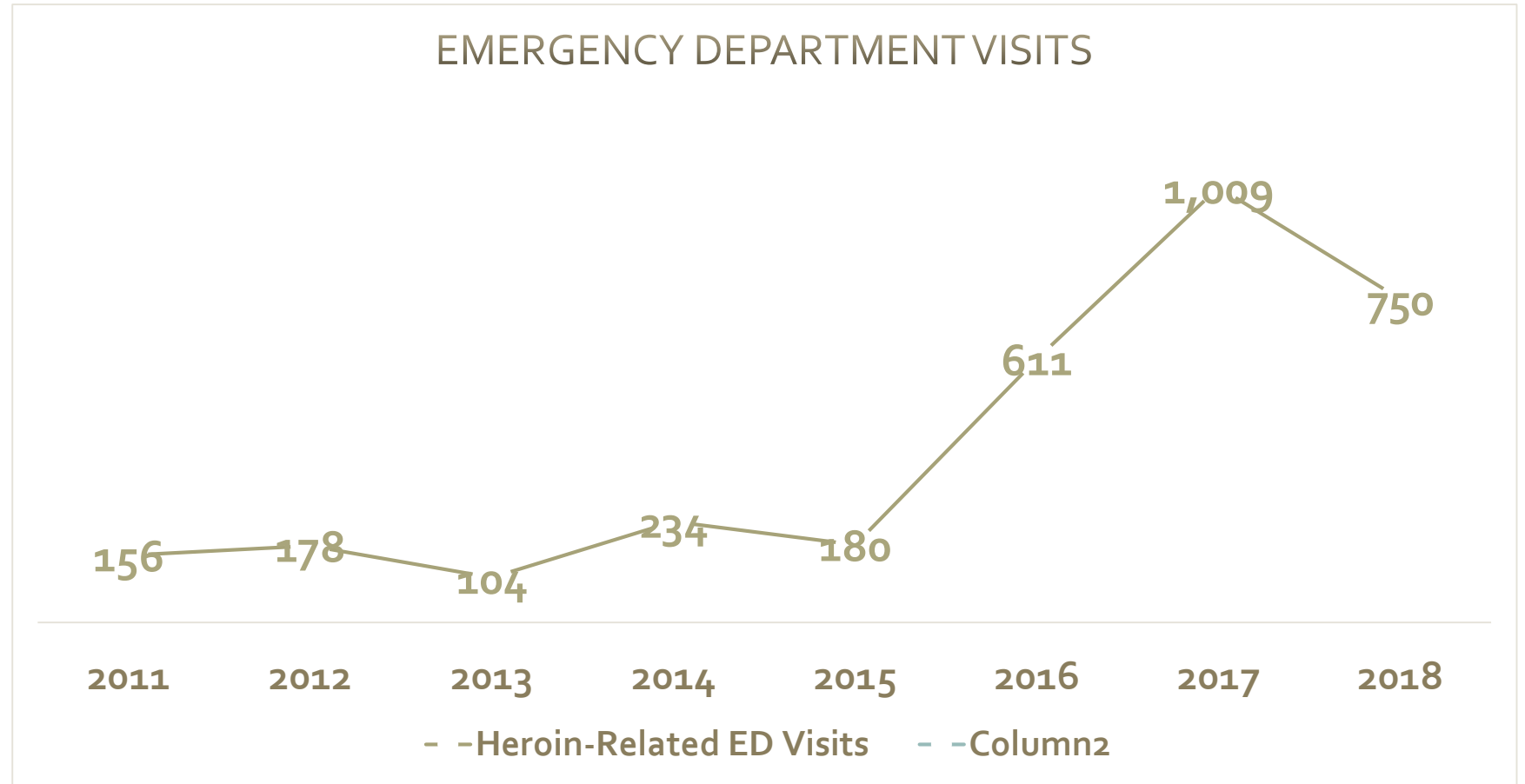
Source: County Health Databook, NC State Center for Health Statistics, 2013-2017 .
Chart prepared by GCDHHS, Public Health Division.

Trends in Opioid-related Overdose Emergency Department Visits



Source: NC Disease Event Tracking and Epidemiologic Collection Tool (NC DETECT).
Chart prepared by GCDHHS, Public Health Division.

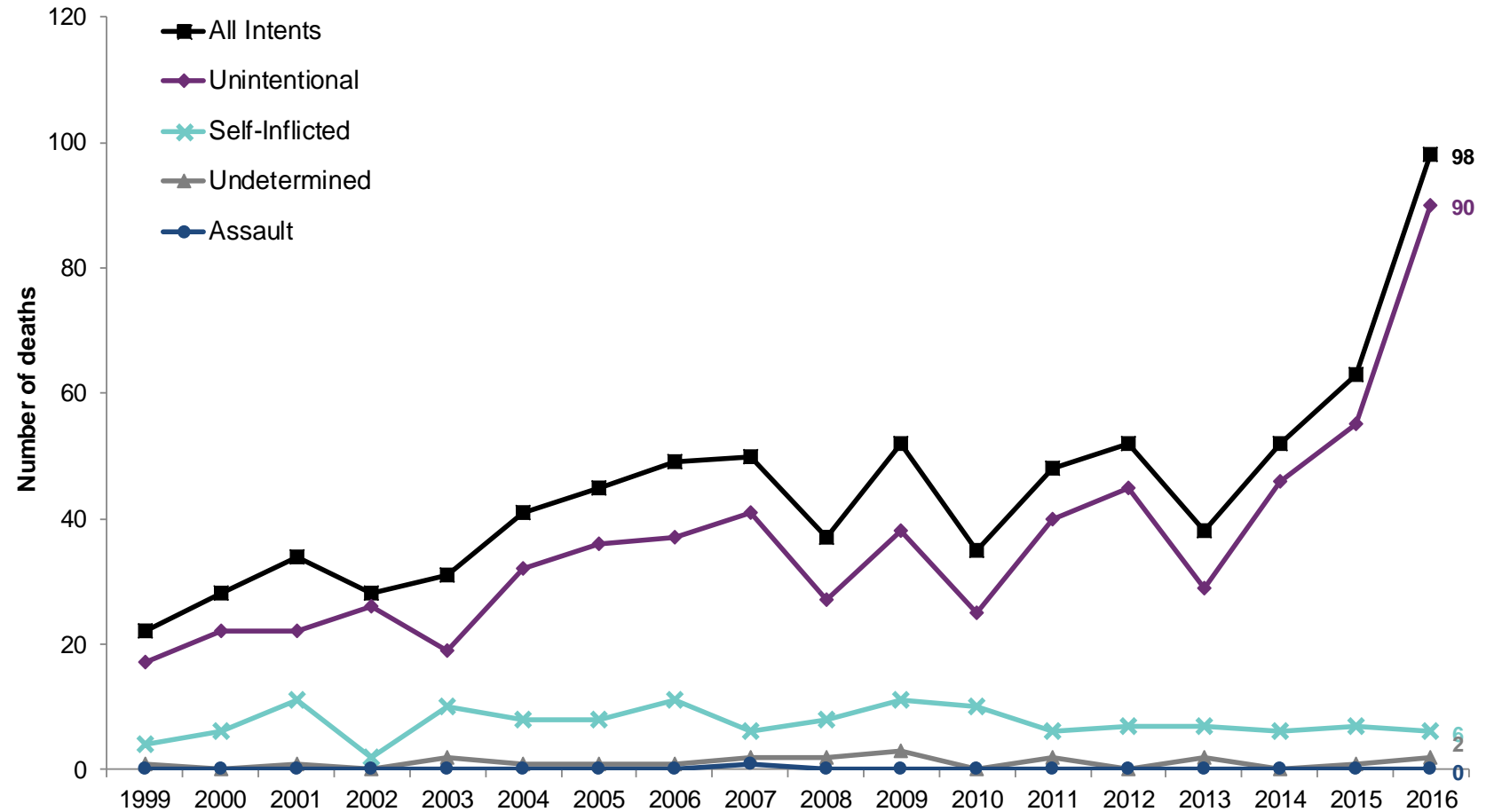
Heroin-related Emergency Department Visits



Source: NC Disease Event Tracking and Epidemiologic Collection Tool (NC DETECT).
Chart prepared by GCDHHS, Public Health Division.

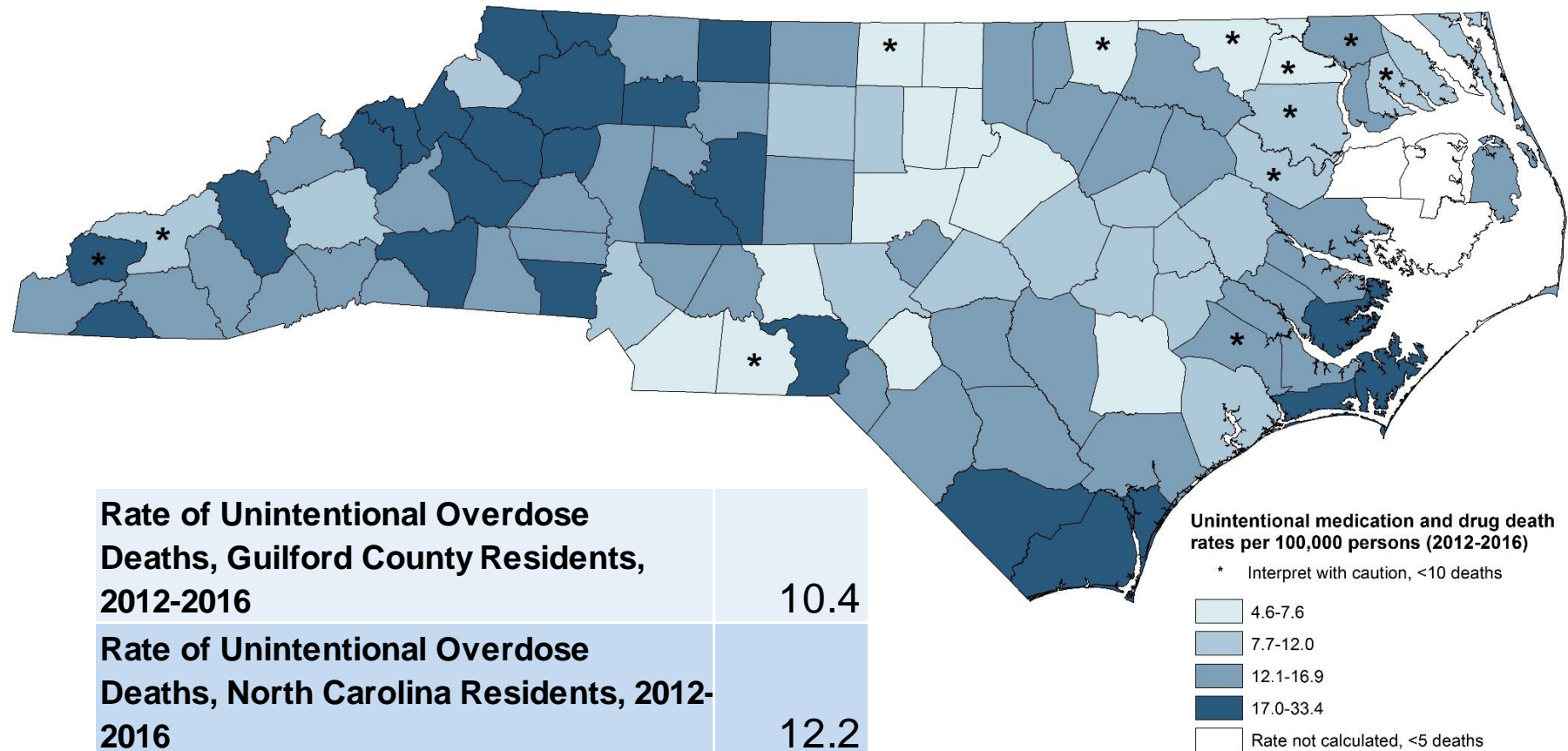
Guilford County Medication & Drug Overdose Deaths by Intent

Guilford County Residents, 1999-2016



Source: N.C. State Center for Health Statistics, Vital Statistics-Deaths, 1999-2016
Medication and drug overdose: X40-X44, X60-X64, Y10-Y14, X85.
Analysis by Injury Epidemiology and Surveillance Unit

Rate of Medication and Drug Overdose Deaths by County per 100,000 North Carolina Residents, 2012-2016

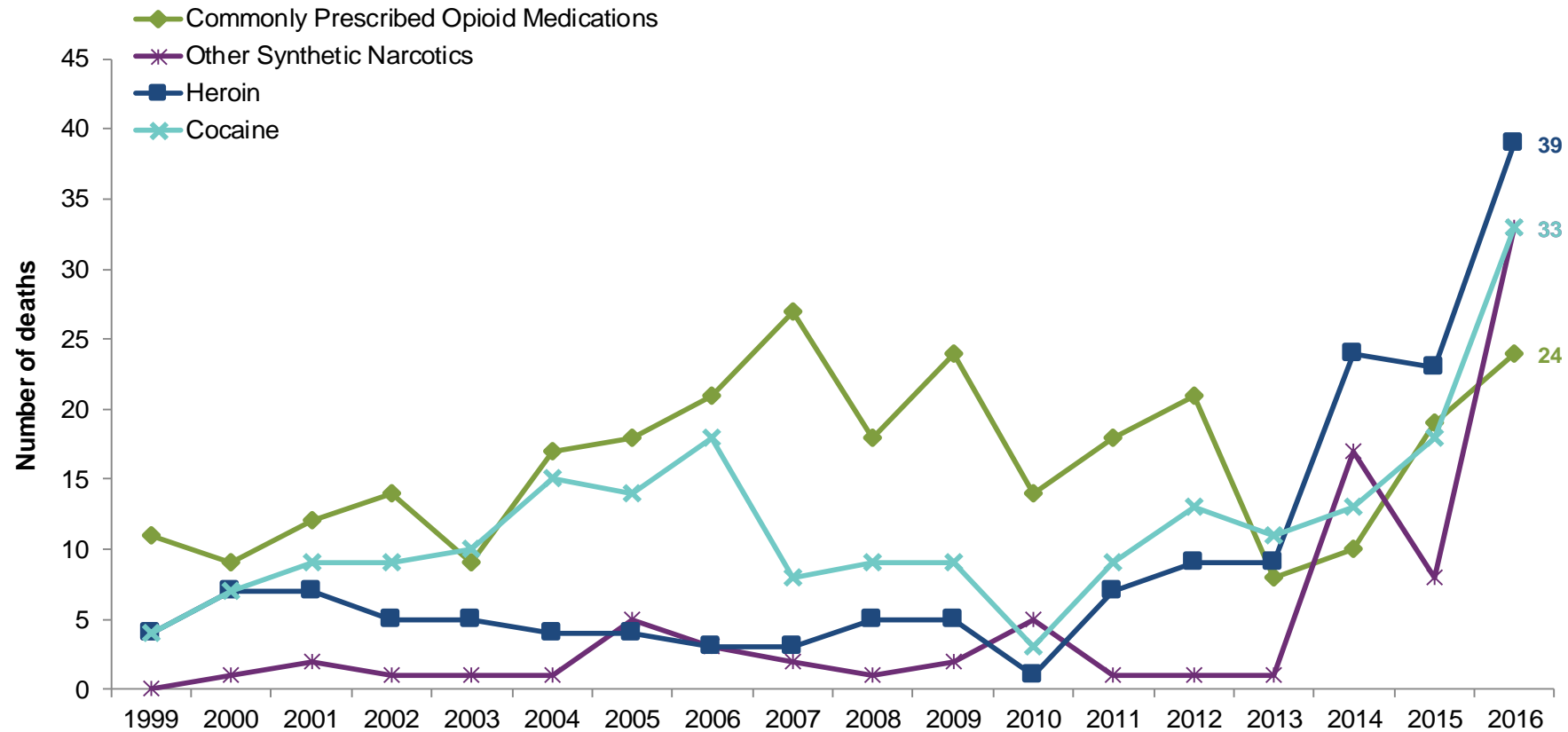


Source: Deaths-N.C. State Center for Health Statistics, Vital Statistics, 2012-2016, Unintentional medication and drug overdose: X40-X44/Population-National Center for Health Statistics, 2012-2016
Analysis by Injury Epidemiology and Surveillance Unit

Substances Contributing to Unintentional Overdose Deaths

Substances Contributing to Unintentional Medication and Drug Overdose Deaths, Guilford County, 1999- 2016

Guilford County Residents, 1999-2016



Source: N.C. State Center for Health Statistics, Vital Statistics-Deaths, 1999-2016, Unintentional medication and drug overdose: X40-X44 with any mention of specific T-codes by drug type. Analysis by Injury Epidemiology and Surveillance Unit

*These counts are not mutually exclusive. If the death involved multiple drugs it can be counted on multiple lines.

Demographics of Unintentional Medication & Drug Overdose Deaths

Guilford County Demographics of Unintentional Medication & Drug Overdose Deaths, by Sex, Age: 2012- 2016

	SEX		AGE				
	M	F	0-17	18-24	25-44	45-64	65+
<i>Guilford County, Overall Population, 2012-2016</i>	48%	52%	23%	11%	26%	26%	14%
Unintentional Overdose Deaths, Guilford County Residents, 2012-2016	67%	33%	0%	12%	49%	35%	3%
Unintentional Overdose Deaths, North Carolina Residents, 2012-2016	63%	37%	0%	9%	49%	39%	3%

Source: Deaths-N.C. State Center for Health Statistics, Vital Statistics, 2012-2016, Unintentional medication and drug overdose: X40-X44/Population-National Center for Health Statistics, 2012-2016
Analysis by Injury Epidemiology and Surveillance Unit

Guilford County Demographics of Unintentional Medication & Drug Overdose Deaths, by Race/Ethnicity: 2012-2016

	RACE				
	White	Black	Asian	Am. Indian	Hisp.
<i>Guilford County, Overall Population, 2012-2016</i>	53%	34%	5%	0%	8%
Unintentional Overdose Deaths, Guilford County Residents, 2012-2016	76%	21%	0%	1%	1%
Unintentional Overdose Deaths, North Carolina Residents, 2012-2016	85%	11%	0%	2%	2%

Source: Deaths-N.C. State Center for Health Statistics, Vital Statistics, 2012-2016, Unintentional medication and drug overdose: X40-X44/Population-National Center for Health Statistics, 2012-2016
Analysis by Injury Epidemiology and Surveillance Unit

Economic and Societal Costs of Medication & Drug Overdose Deaths

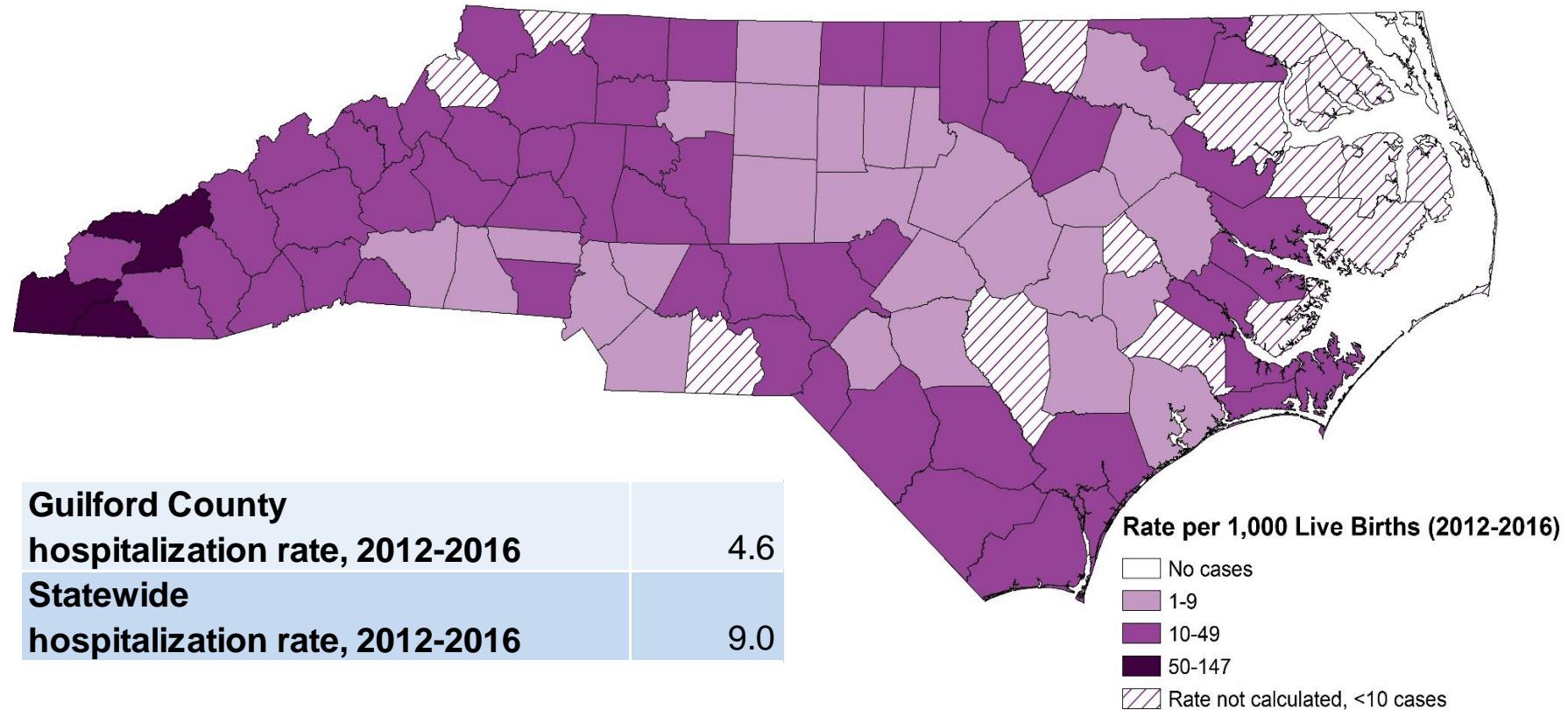
Estimated Total
Lifetime Cost of
Medical and
Work Loss from
Medication &
Drug Fatalities
All intents, 2016

Total Medical Costs in Guilford County, 2016	\$ 552,004
Total Work Loss Costs in Guilford County, 2016	\$ 122,776,900
Combined Cost	\$ 123,328,904

Cost per capita in Guilford County, 2016	\$ 236.57
--	-----------

Source: Deaths-N.C. State Center for Health Statistics, Vital Statistics, 2016, Unintentional medication and drug overdose: X40-X44/Population-National Center for Health Statistics, 2016/Economic impact-CDC WISQARS, Cost of Injury Reports, National Center for Injury Prevention and Control, CDC for all medication and drug deaths (any intent), Base year (2010) costs indexed to state 2015 prices.
Analysis by Injury Epidemiology and Surveillance Unit

Hospitalizations Associated with Drug Withdrawal Syndrome in Newborns per 1,000 Live Births, North Carolina Residents, 2012-2016

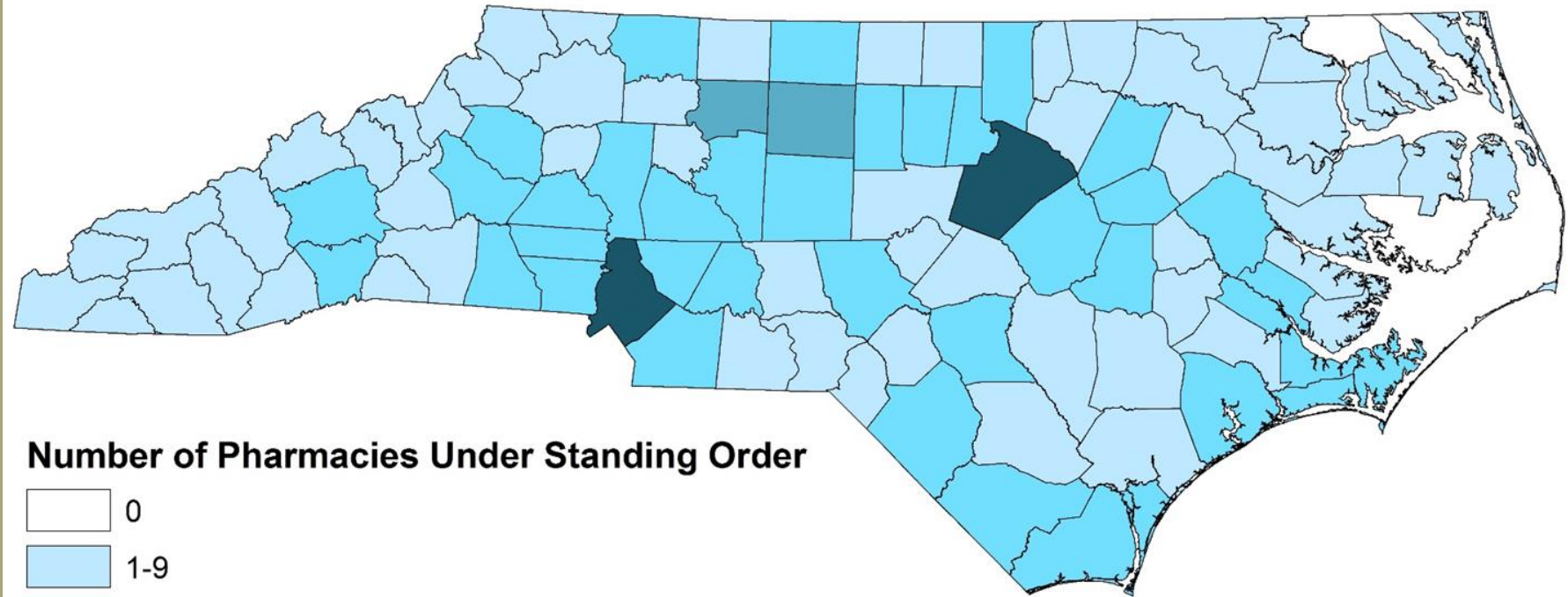


NOTE: 2014 data structure changed to include up to 95 diagnosis codes. 2015 ICD 9 CM coding system transitioned to ICD10 CM. The impact of these changes on surveillance is unclear.

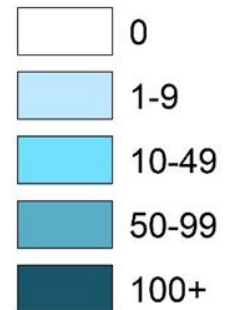
Source: N.C. State Center for Health Statistics, Hospital Discharge Dataset, 2012-2016
Analysis by Injury Epidemiology and Surveillance Unit

Prevention, Treatment, and Harm Reduction

Number of
Pharmacies under
Standing Order by
County
October 2017
(N=1,407)



Number of Pharmacies Under Standing Order



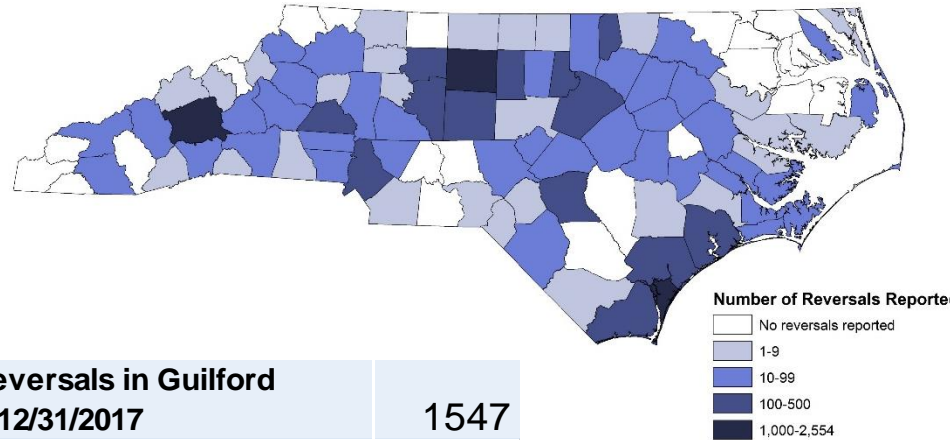
**Pharmacies in Guilford County under
Standing Order, as of October 2017**

72

Source: Division of Public Health, October 2017
Analysis: Injury Epidemiology and Surveillance Unit

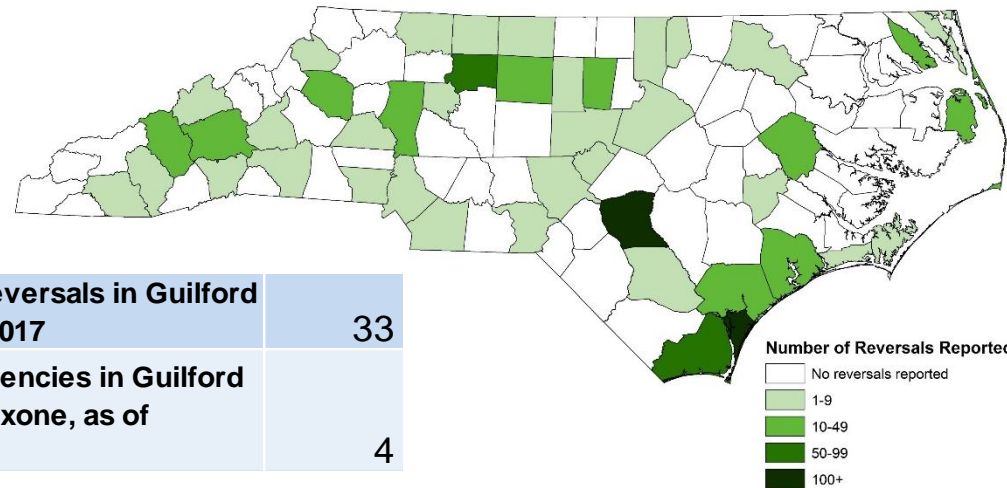
Opioid Overdose Reversals with Naloxone

Community naloxone reversals reported to the NC Harm Reduction Coalition:
8/1/2013 - 12/31/2017 (9,632 total reversals reported)



Community Reversals in Guilford County, as of 12/31/2017	1547
---	-------------

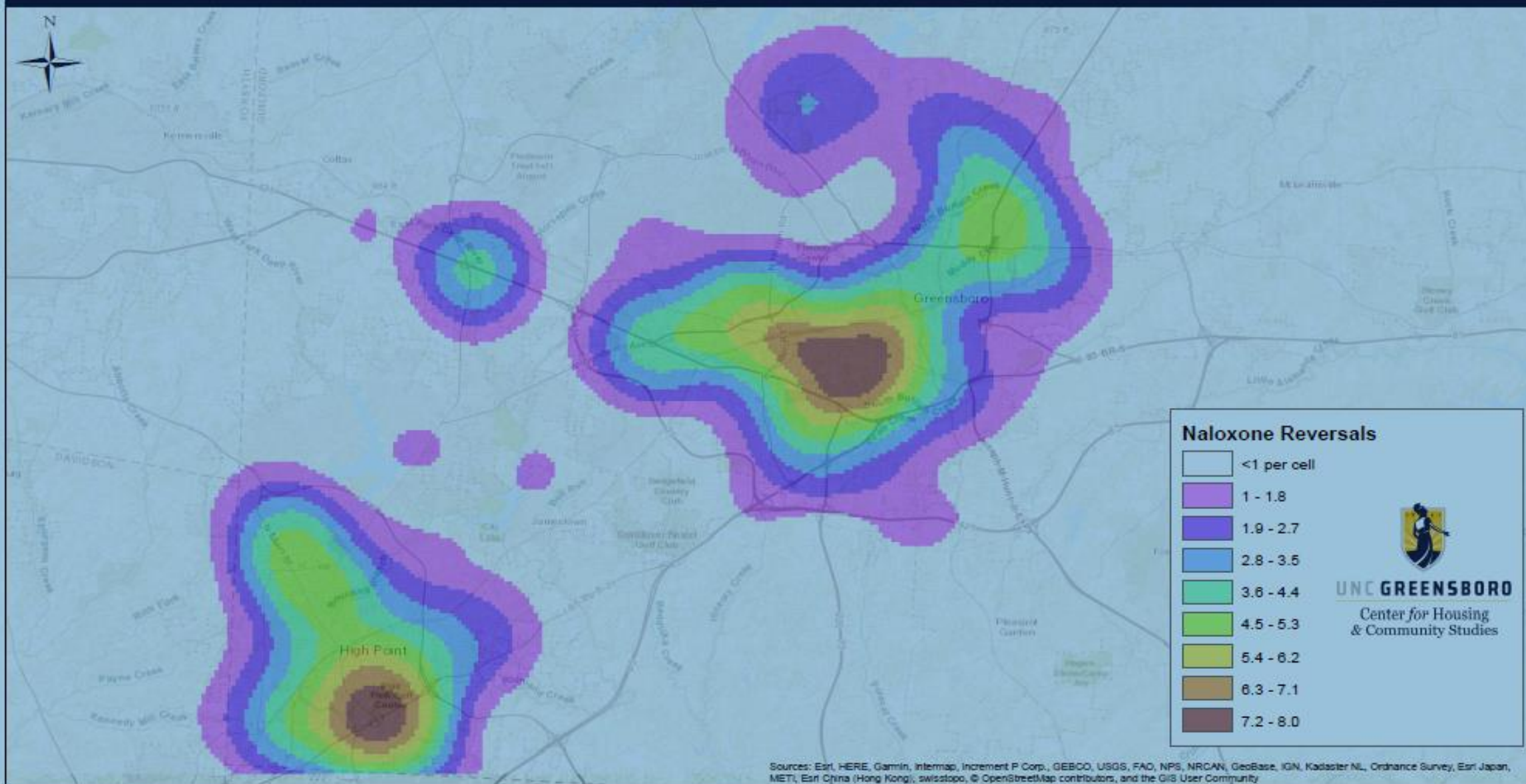
Law Enforcement naloxone reversals reported to the NC Harm Reduction Coalition:
1/1/2015 - 12/31/2017 (821 total reversals reported)



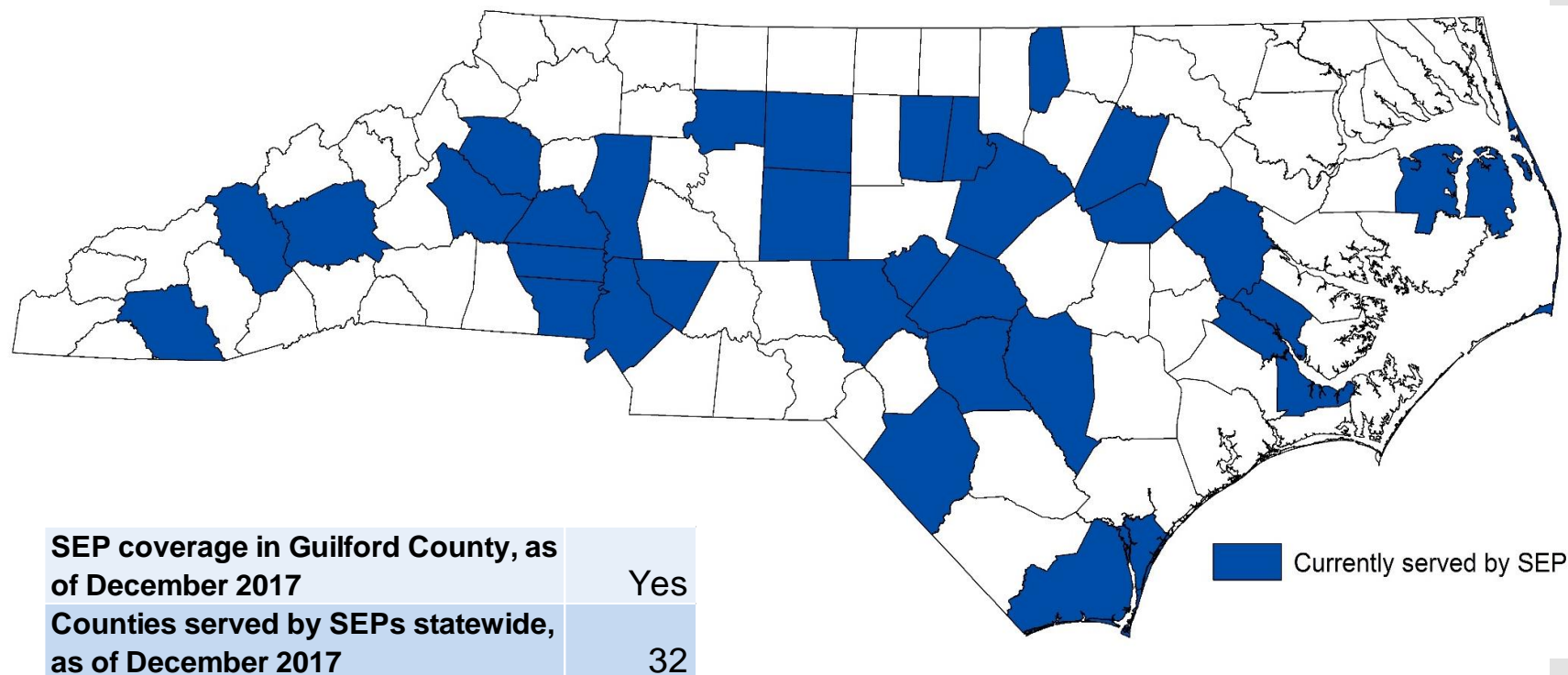
Law Enforcement Reversals in Guilford County, as of 12/31/2017	33
Law Enforcement Agencies in Guilford County carrying naloxone, as of 12/31/2017	4

Source: North Carolina Harm Reduction Coalition, January 2018
Analysis: Injury Epidemiology and Surveillance Unit

Density of Naloxone Reversals in Guilford County

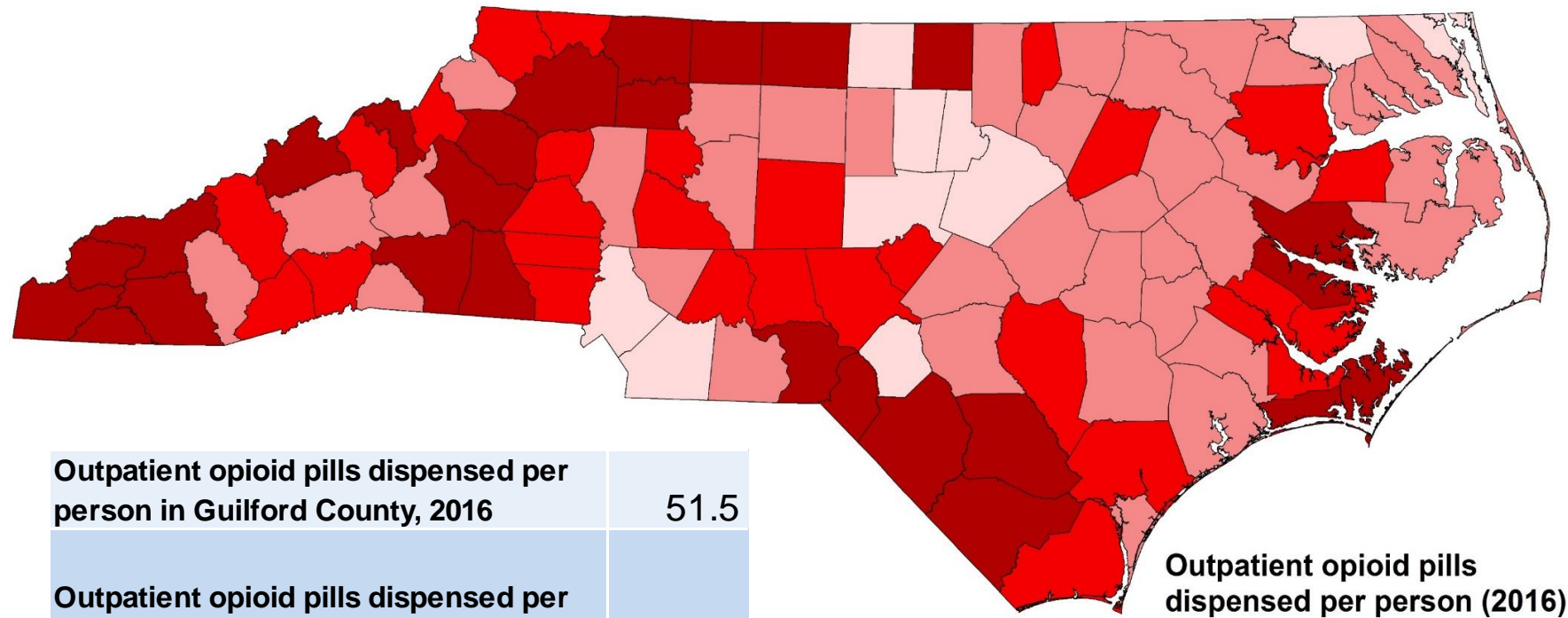


Counties
Currently
Served by
Syringe
Exchange
Programs
(SEPs)
December
2017
(26 active*
SEPs)

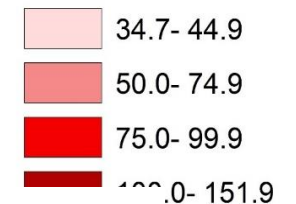


Source: North Carolina Division of Public Health, January 2018
Analysis: Injury Epidemiology and Surveillance Unit

Rate of Outpatient Opioid Pills Dispensed by County per North Carolina Resident, 2016



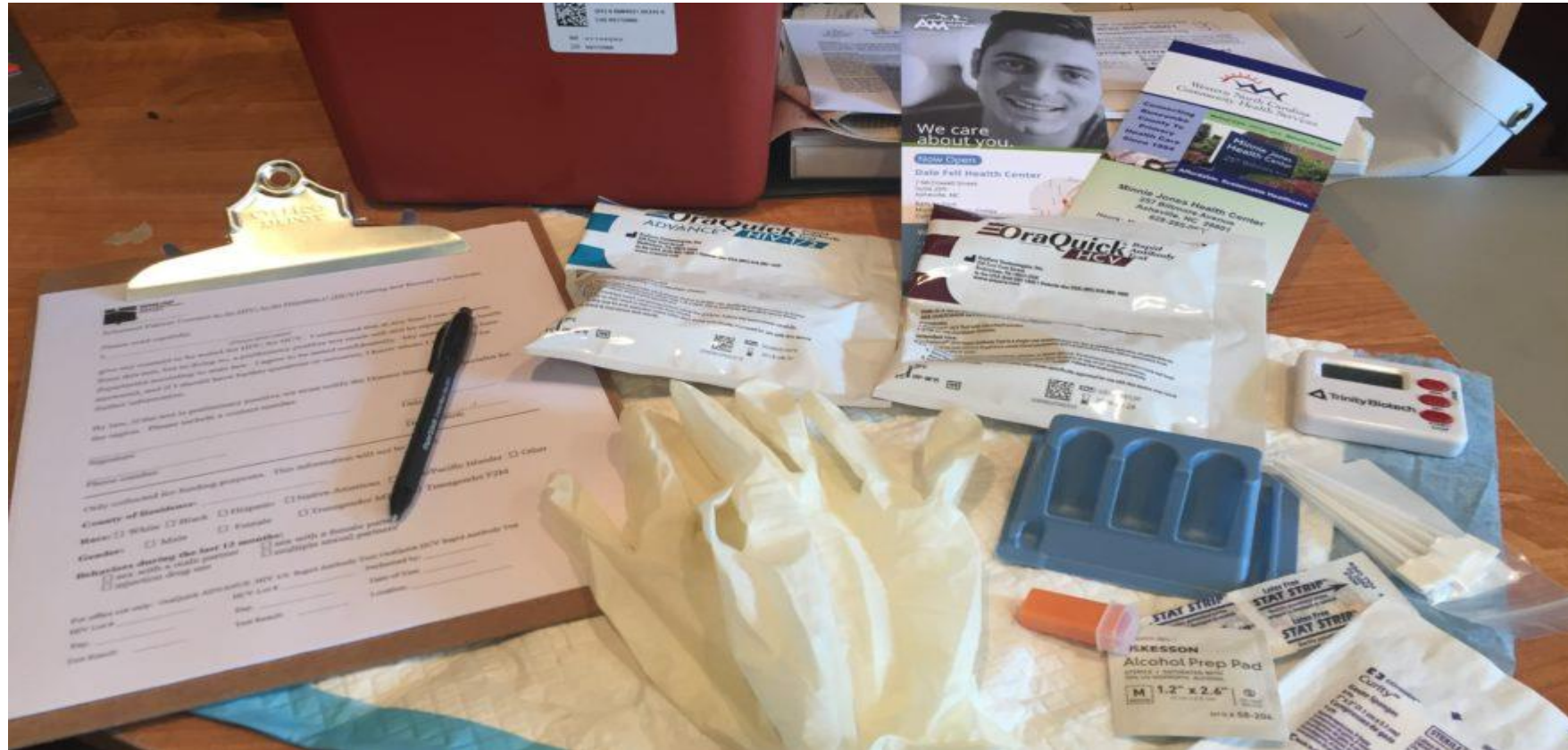
Outpatient opioid pills
dispensed per person (2016)



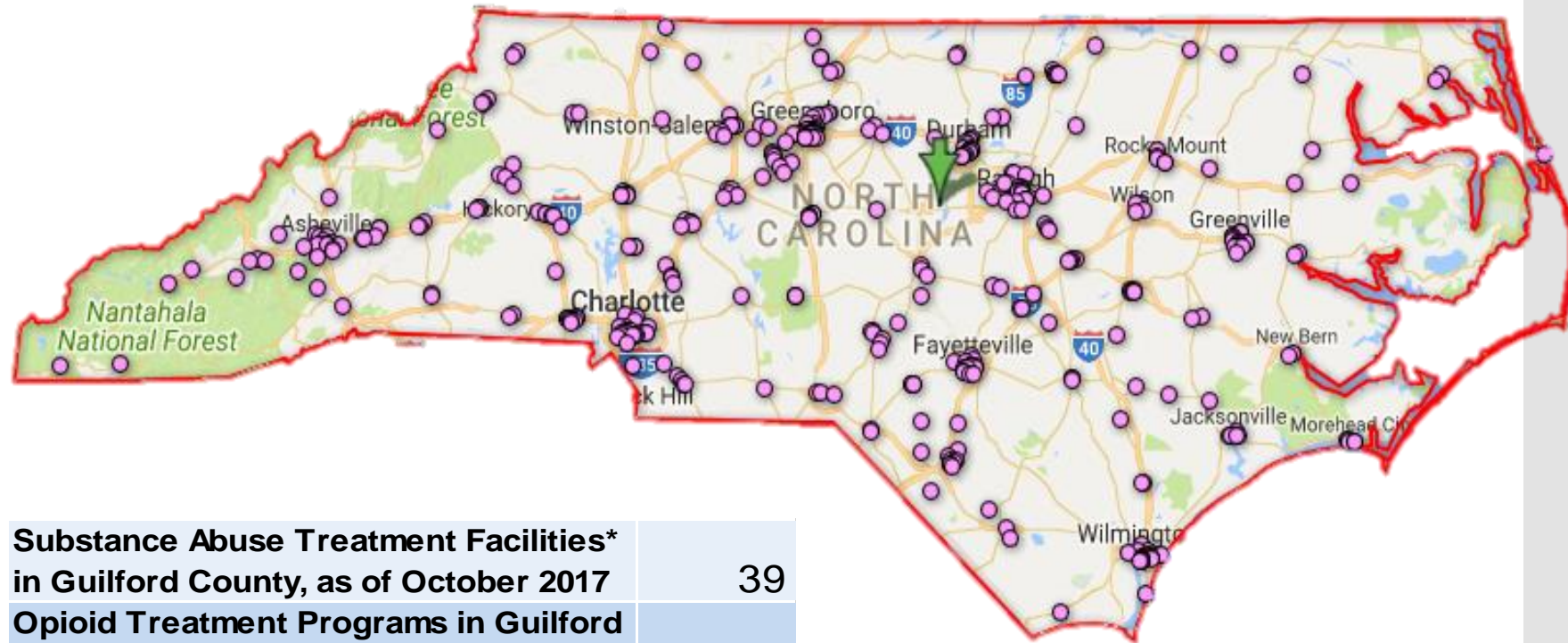
Source: Opioid Dispensing – NC Division of Mental Health, Controlled Substance Reporting System, 2016/ Population- National Center for Health Statistics, 2016
Analysis: Injury Epidemiology and Surveillance Unit

North Carolina
Injury & Violence
PREVENTION Branch

Tackling the Opioid Epidemic



Availability of Substance Abuse Treatment Facilities, SAMHSA



Substance Abuse Treatment Facilities* in Guilford County, as of October 2017	39
Opioid Treatment Programs in Guilford County, as of October 2017	3

*Substance abuse treatment facilities must meet certain eligibility criteria to be listed on the SAMHSA website; not all facilities are in-patient; see notes for more details.

Source: Behavioral Health Treatment Services Locator – SAMHSA, Substance Abuse Treatment Facilities, Accessed 10/2017. Medication Assisted Therapy, Opioid Treatment Program Directory – SAMHSA, Accessed 10/2017.

**NORTH CAROLINA'S
OPIOID ACTION PLAN**
2017-2021

Primary Strategies of the State's Plan

- Reduce the oversupply of prescription opioids
- Reduce the diversion of prescription drugs and the flow of illicit drugs
- Increase community awareness and prevention
- Make naloxone widely available
- Expand treatment and recovery systems of care

<https://www.ncdhhs.gov/about/departments-initiatives/opioid-epidemic>

NORTH CAROLINA OPIOID ACTION PLAN(2017-2021)

Prescription Drug Abuse Advisory Committee (PDAAC)

	Metrics	Current Data	2021 Trend/ Goal
OVERALL			
	Number of unintentional opioid-related deaths (ICD10)	1,194 (2016, provisional)	20% reduction in expected 2021 number
	Rate of opioid ED visits (all intents)	38.2 per 100,000 residents (2015)	20% reduction in expected 2021 number
Reduce Oversupply of Prescription Opioids			
★	Rate of multiple provider episodes for prescription opioids (times patients received opioids from >=5 prescribers dispensed at >=5 pharmacies in a six-month period), per 100,000 residents	27.3 per 100,000 residents (2015)	Decreasing trend
	Total number of opioid pills dispensed	555,916,512 (2016)	Decreasing trend
	Percent of patients receiving more than an average daily dose of >90 MME of opioid analgesics, per quarter	12.3% (Q1 2017)	Decreasing trend
	Percent of prescription days any patient had at least one opioid AND at least one benzodiazepine prescription on the same day, per quarter	21.1% (Q1 2017)	Decreasing trend
Reduce Diversion/ Flow of Illicit Drugs			
	Percent of opioid deaths involving heroin or fentanyl/ fentanyl analogues	58.4% (2016, provisional)	-----
	Number of acute Hepatitis C cases	182 (2016, provisional)	Decreasing trend
Increase Access to Naloxone			
★	Number of EMS naloxone administrations	13,069 (2016)	-----
	Number of community naloxone reversals	3,616 (2016)	Increasing trend
Treatment and Recovery			
	Number of buprenorphine prescriptions dispensed	467,243 (2016)	Increasing trend
★	Number of uninsured individuals with an opioid use disorder served by treatment programs	12,248 (SFY16)	Increasing trend
★	Number of certified peer support specialists (CPSS) across NC	2,383 (2016)	Increasing trend

State / County / Region:

NC ▼

🏠 NC OAP Dashboard Home

📊 Metric Summary Table

- Reduce Death/ED Outcomes

- Reduce Oversupply

- Reduce Diversion

- Naloxone Access

🏠 NC Opioid Action Plan Data Dashboard

In 2017, over 5 North Carolinians died each day from an unintentional opioid overdose. From 1999-2017, more than 13,000 North Carolinians lost their lives to unintentional opioid overdose. To combat the opioid crisis, the North Carolina Department of Health and Human Services worked with community partners to develop North Carolina's Opioid Action Plan (NC OAP). The NC OAP launched in June of 2017 and established thirteen data metrics to track and monitor the opioid epidemic. The opioid data dashboard on this site is meant to provide integration and visualization of state and county-level metrics for stakeholders across NC to track progress towards reaching the goals outlined in NC OAP. For more information on the NC OAP visit: <https://www.ncdhhs.gov/opioids>

NC Overdose Overview Stats:

1,884NC resident unintentional opioid overdose deaths in 2017
(through Q4)**7,453**

NC resident opioid overdose ED visits in 2017

521,375,000

Opioid pills dispensed to NC residents in 2017

4,176

Reported community naloxone reversals in NC in 2017

Check out the following 'How-To' video below to learn about the different ways you can use the dashboard, navigate its features, and apply the information to best meet your needs. We offer the information on the NC Opioid Dashboard in staged approaches, starting with an overview Summary Table of the metrics from North Carolina's Opioid Action Plan, followed by specific metric information organized by its five strategy areas. For detailed information on each of the metric, including trends over time and a map of the data in each county, click the strategy area link to the left. Each metric also links to the Technical Notes for those who'd like to get into the nitty gritty details of the data.

<https://injuryfreenc.shinyapps.io/OpioidActionPlan/>

Opioid deaths decrease in Guilford County less than a year after program's launch

GREENSBORO — In the midst of the opioid epidemic, Guilford County saw a decrease in the number of deaths last year caused by the narcotics.

In 2018, 912 opioid calls that Guilford County paramedics responded to ended in 79 deaths, according to Emergency Services Director Jim Albright. That's 35 fewer than the previous year, though the number of overdoses increased by 217 calls.

The opioid epidemic has been a concern in Guilford County since 2014.

Local Initiatives










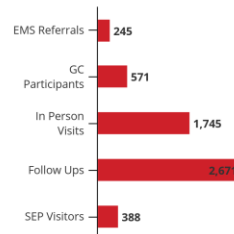
GCSTOP Outcomes

MARCH 2018-APRIL 2019

Life Saving

Distributed	Collected	Naloxone	Treatment	Rescues
				
228,020	103,805	1,661	157	447

Participant Counts



Review

"I would not be alive if my husband had not performed cpr while waiting on first responders to arrive and administer Narcan... 3 doses later I woke up... not long after that I received a package from GCSTOP with Narcan and other harm reduction items... then I had another overdose where my husband administered the narcan from GCSTOP and saved my life...After my 3rd or 4th overdose I received a phone call from an employee, Guillermo, where I was informed of all the wonderful options and things offered by this amazing community outreach program... we talked for probably 45 minutes...it gave me a glimmer of hope in such a dark time in my life... I am working on 8 months clean and have a life I never dreamed"

HARM REDUCTION SAVES LIVES

Behavioral Health Issues

Close to 3.9% of adults in North Carolina (according to [SAMHSA](#)) live with serious mental health conditions such as [schizophrenia](#), [bipolar disorder](#), and [major depression](#).

Only 48.2% of adults with mental illness in North Carolina receive any form of treatment from either the public system or private providers (according to [SAMHSA](#)). The remaining 51.8% receive no mental health treatment. According to [Mental Health America](#), North Carolina is ranked 33 out of the 50 states and Washington D.C. for providing access to mental health services.

Mental health and substance use disorders are among the top conditions for disability and burden of disease, as well as cost to families, employers, and publicly funded health systems in the United States and worldwide. In 2014, approximately one in five adults in North Carolina had a diagnosable mental, behavioral, or emotional disorder during the past year and one in twelve adults was dependent on or abusing alcohol or illegal drugs.*

* 2016 Report from the NCIOM Task Force on Mental Health and Substance Use. North Carolina Medical Journal November-December 2016 vol. 77 no. 6 437-440

North Carolina Adolescent Mental Health Facts

Depression symptoms among high school students (grades 9-12), 2017 [MH1](#)

Percent of high school students who report they felt sad or hopeless almost every day for 2 or more weeks in a row so that they stopped doing some usual activities (during the 12 months before the survey)	North Carolina	United States
Total	29%	31%
Male	20%	21%
Female	39%	41%

Depressive episodes, ages 12-17, 2015-2016 [MH2](#)

Percent of adolescents ages 12-17 who report they had at least 1 major depressive episode 1 (during the 12 months before the survey)	North Carolina	United States
Total	12%	13%

Suicidal thoughts, attempts, and related injuries among high school students
(grades 9-12), 2017 [MH1](#)

Percent of high school students who report they attempted suicide 1 or more times (during the 12 months before the survey)	North Carolina	United States
Total	8%	7%
Male	6%	5%
Female	10%	9%

Percent of high school students who report they seriously considered attempting suicide (during the 12 months before the survey)	North Carolina	United States
Total	16%	17%
Male	11%	12%
Female	21%	22%

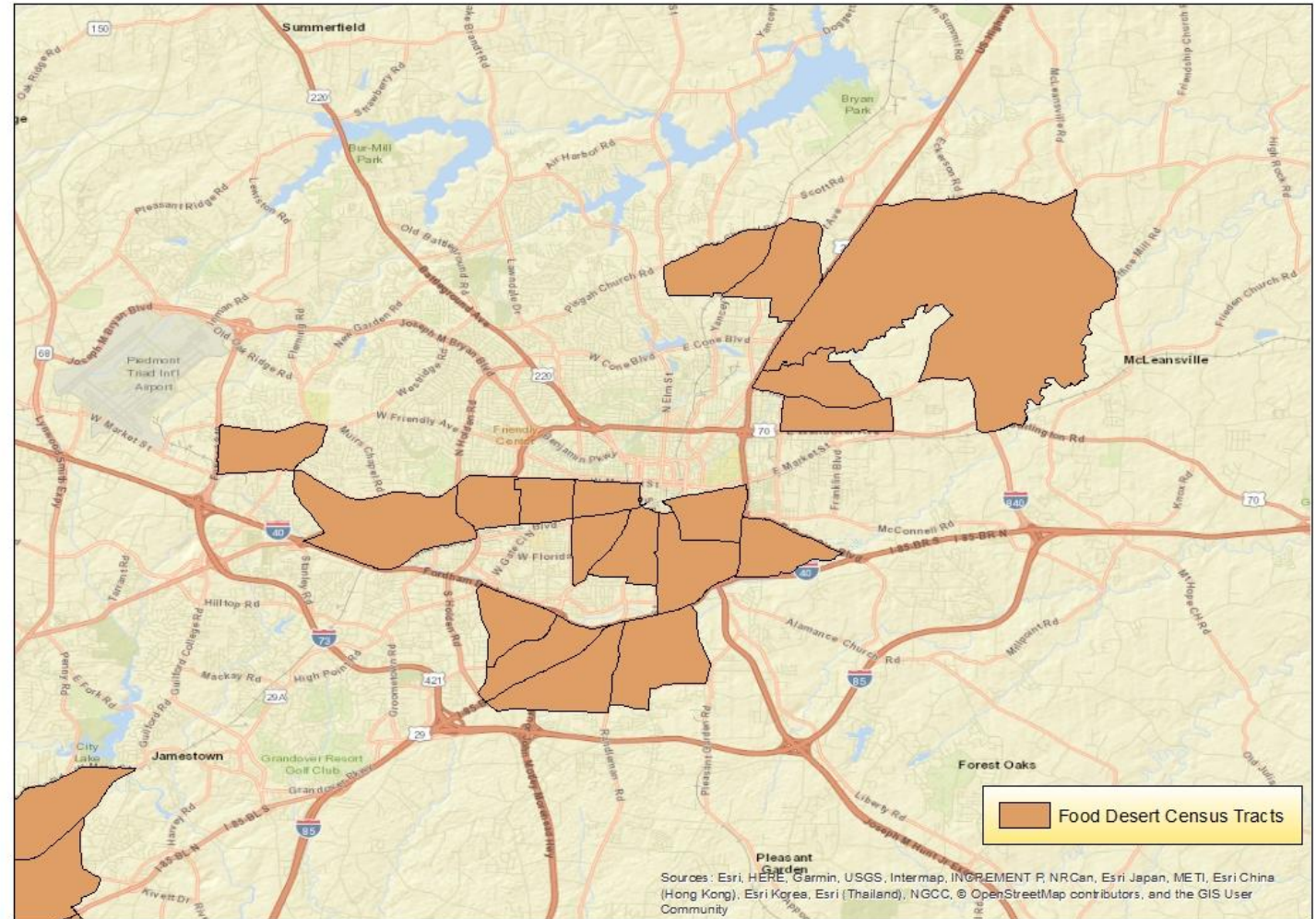
Percent of high school students who report they attempted suicide resulting in an injury, poisoning, or overdose that had to be treated by a doctor or nurse (during the 12 months before the survey)	North Carolina	United States
Total	3%	2%
Male	3%	2%
Female	3%	3%

Healthy Eating and Active Living in Guilford County

2019 Guilford County Community Health Assessment
Appendix E

Access to Healthy Food

Food Desert Census Tracts in Guilford County

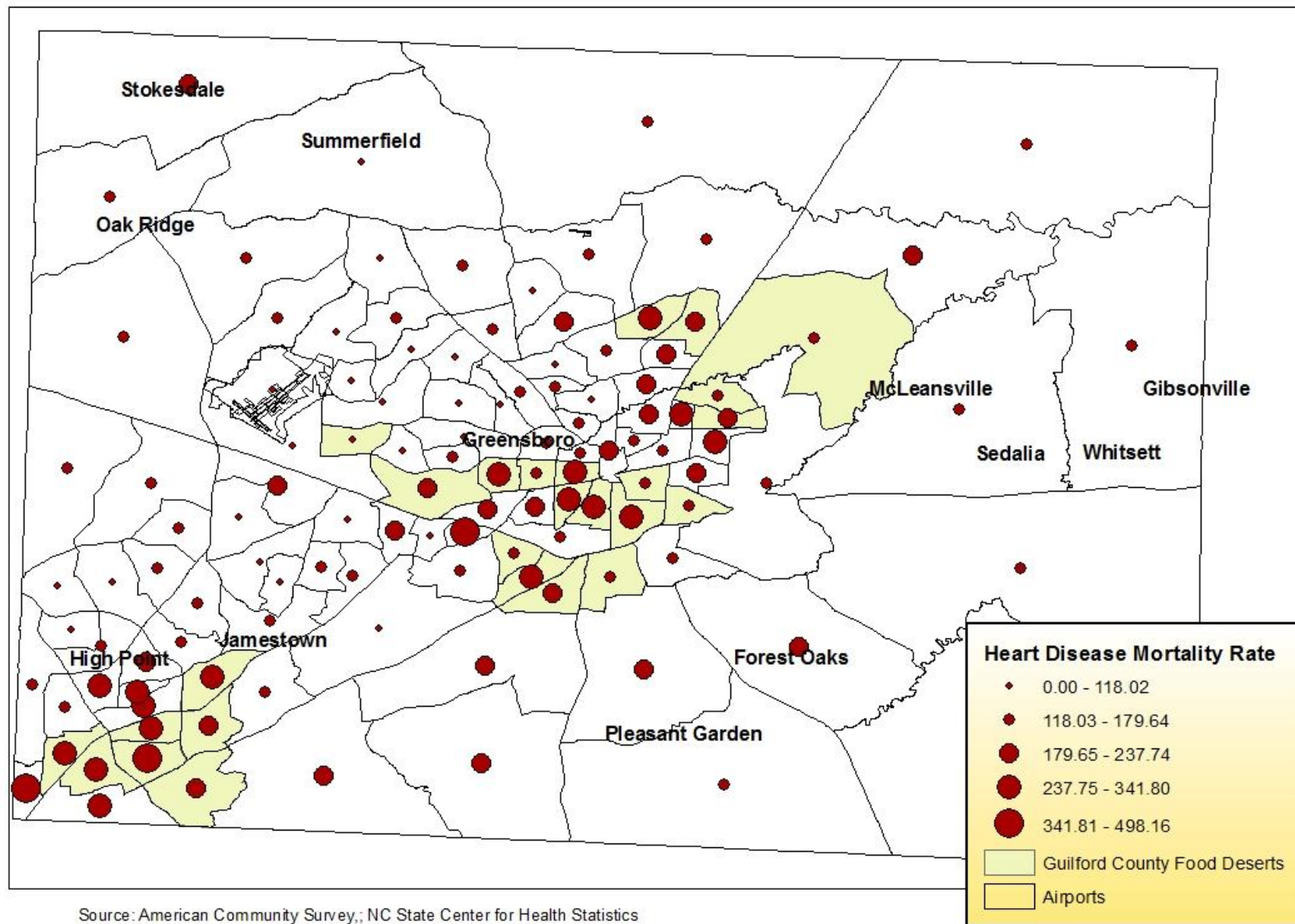


Source: USDA Food Desert Locator Map, 2015

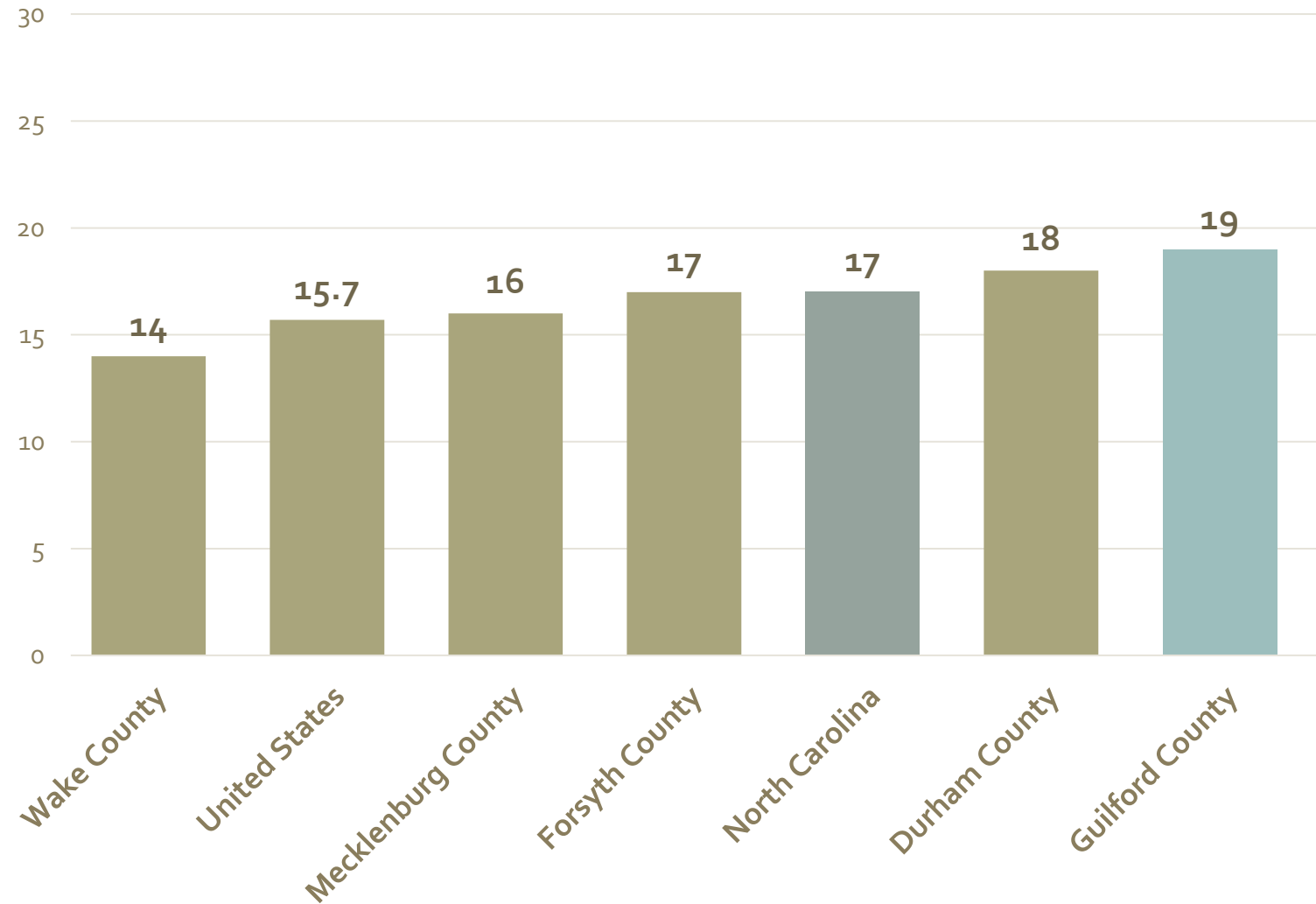
Map prepared by the GCDHHS, Division of Public Health.

Age-Adjusted Heart Disease Mortality Rates by Census Tract, Guilford County

Why is it an important health issue?

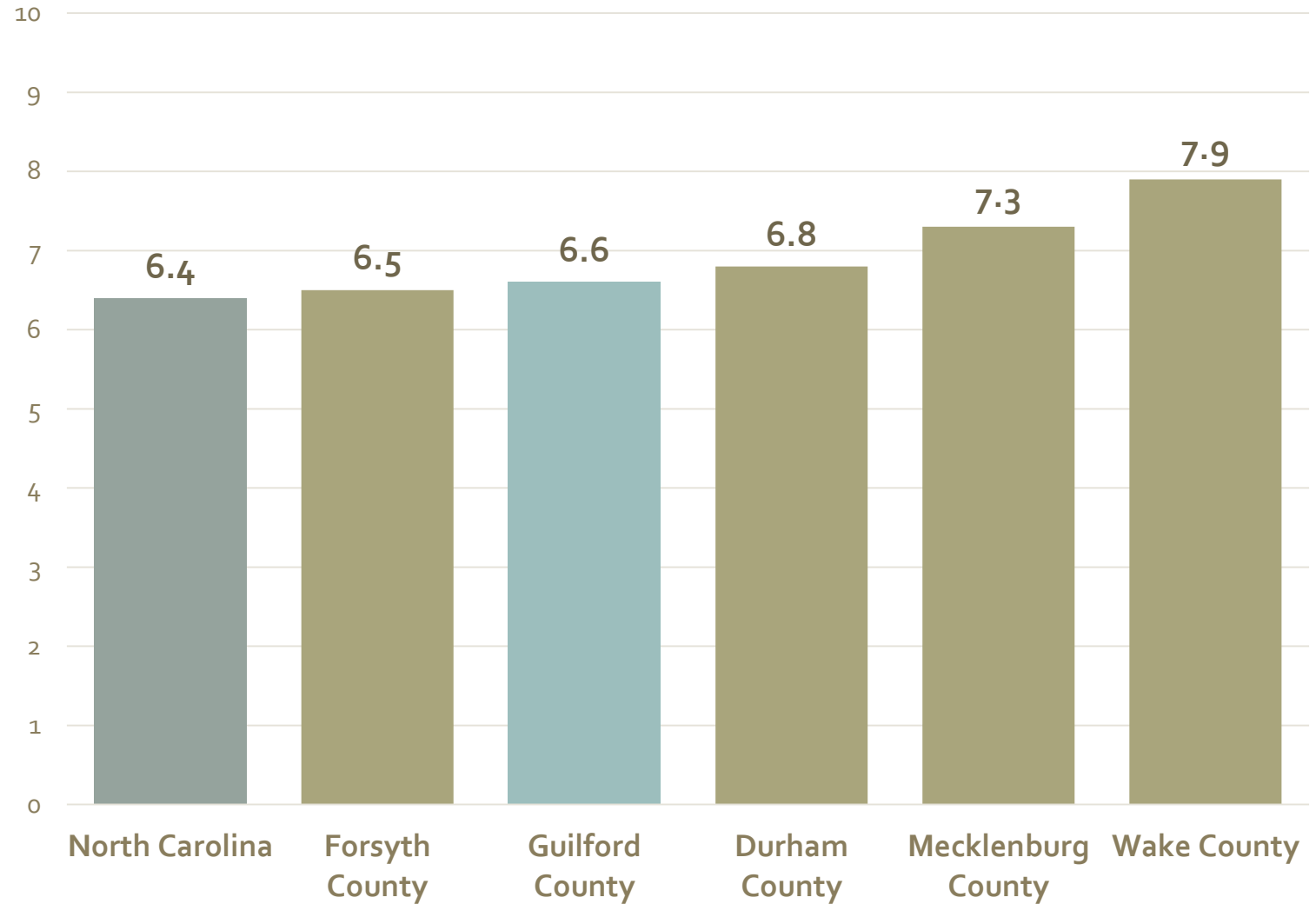


Percentage of persons experiencing food insecurity by county



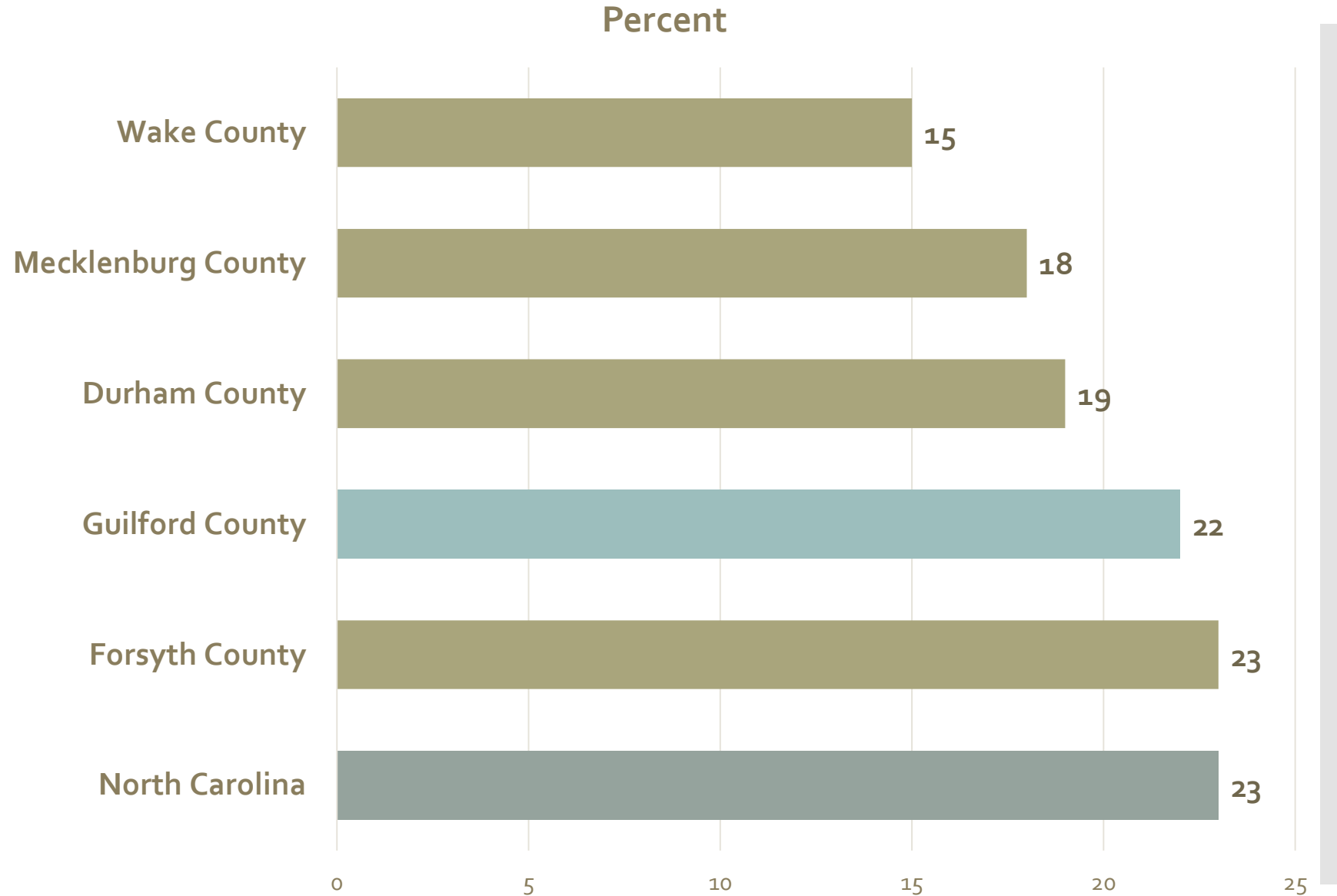
Sources: County Health Rankings BRFSS 2017, USDA 2017 (US Rate).
Chart prepared by the GCDHHS, Division of Public Health.

Food environment index, county comparisons



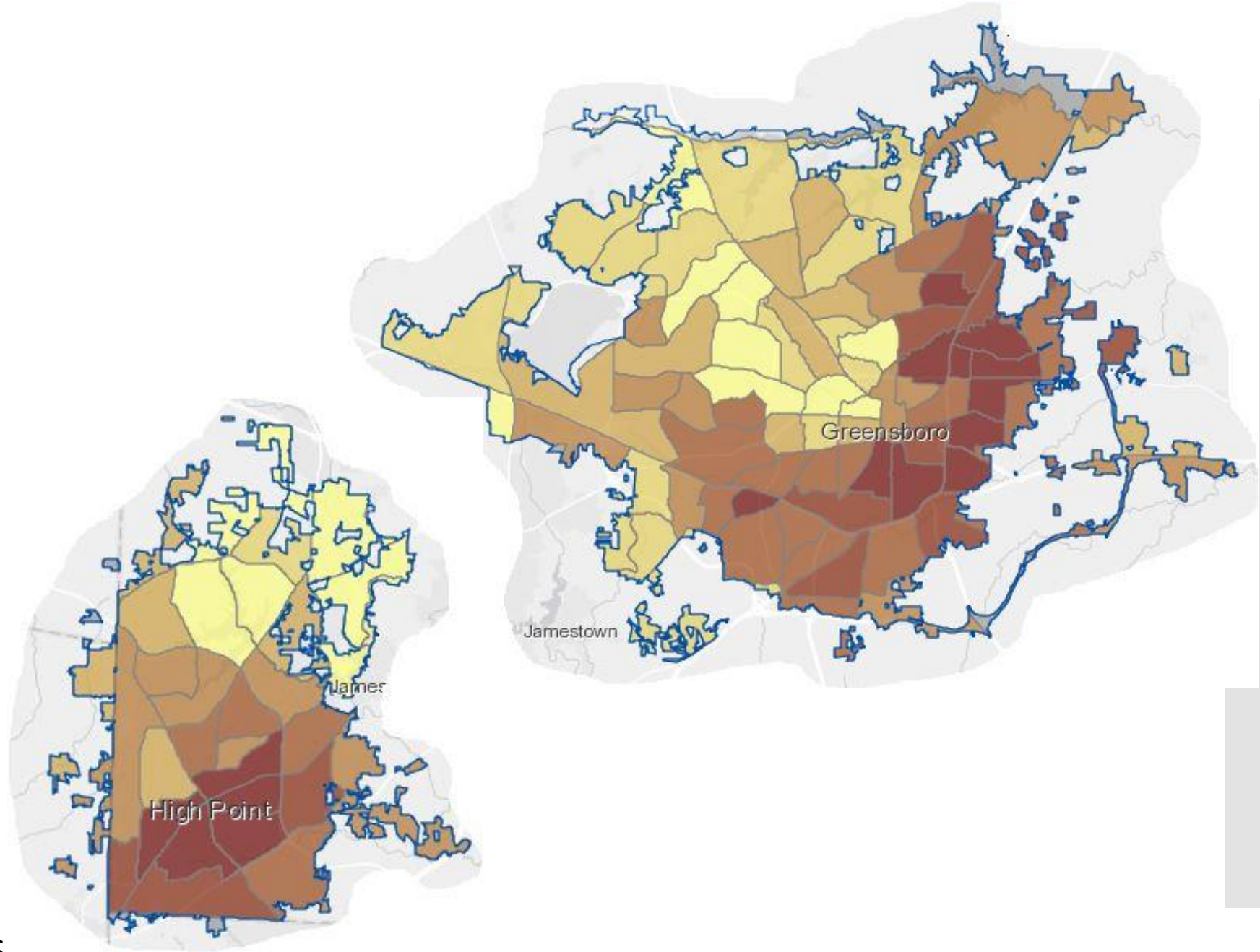
Sources: County Health Rankings BRFSS 2017.
Chart prepared by the GCDHHS, Division of Public Health.

Percent engaging in no Leisure-Time Physical Activity



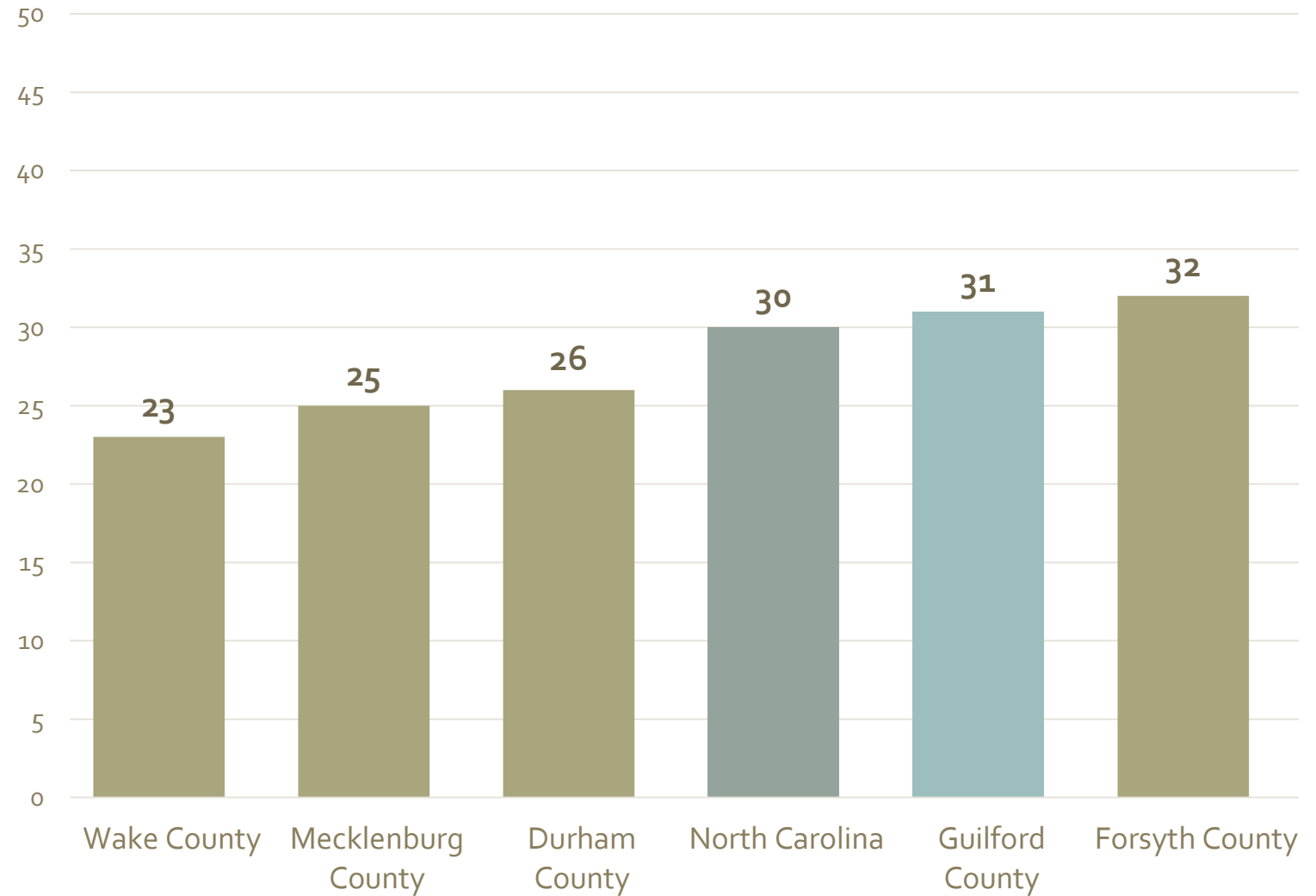
Sources: County Health Rankings BRFSS 2017.
Chart prepared by the GCDHHS, Division of Public Health.

No leisure-time physical activity by census tract



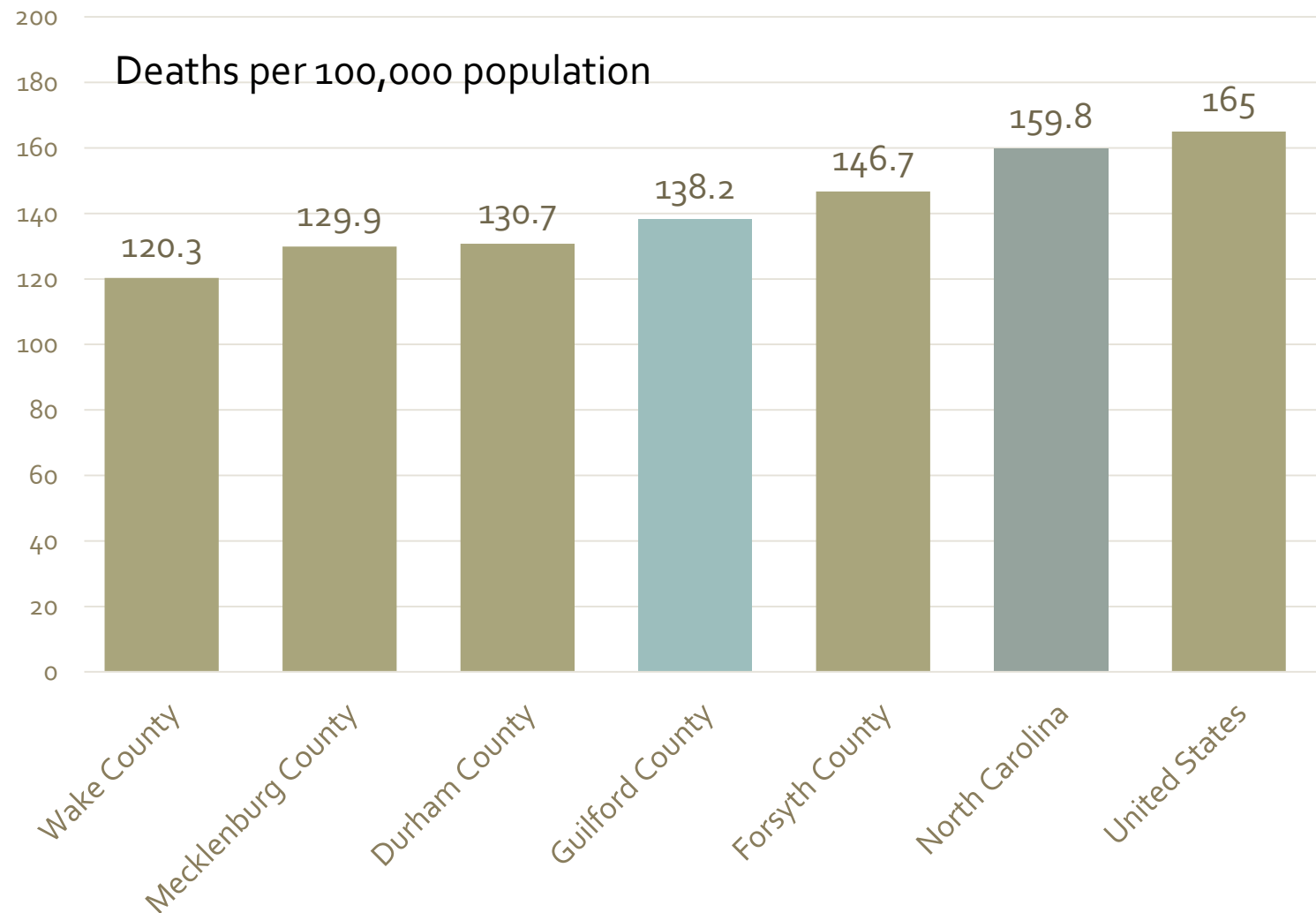
Source: CDC 500 Cities Project, 2016.
Chart prepared by the GCDHHS, Division of Public Health.

Percentage of adult obesity, county comparisons



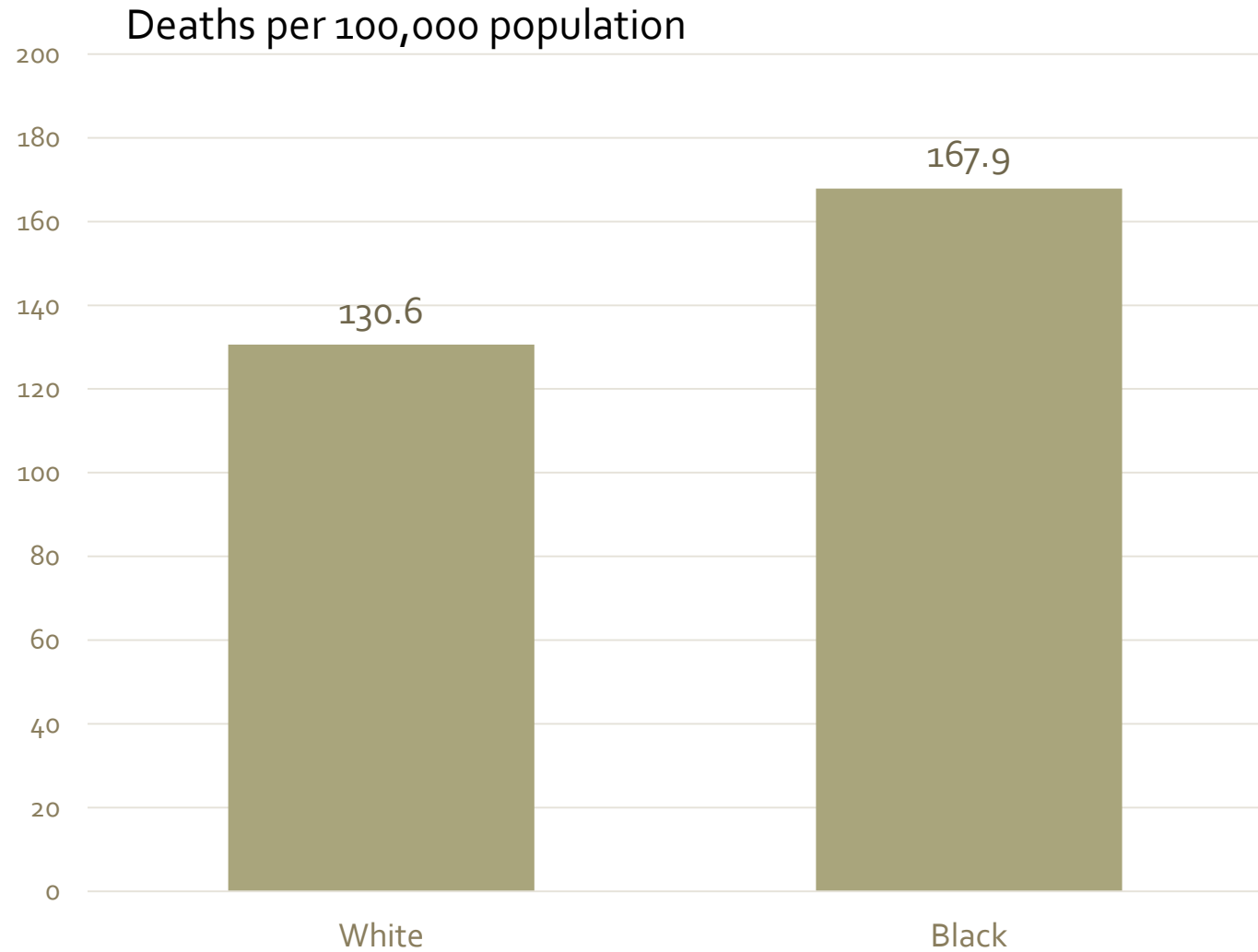
Sources: County Health Rankings BRFSS 2017, CDC Report 2015-2016 (US Rate).
Chart prepared by the GCDHHS, Division of Public Health.

Age-adjusted heart disease mortality rates by county



Sources: SCHS Databook, 2013-2017, CDC Report 2017 (US Rate).
Chart prepared by the GCDHHS, Division of Public Health.

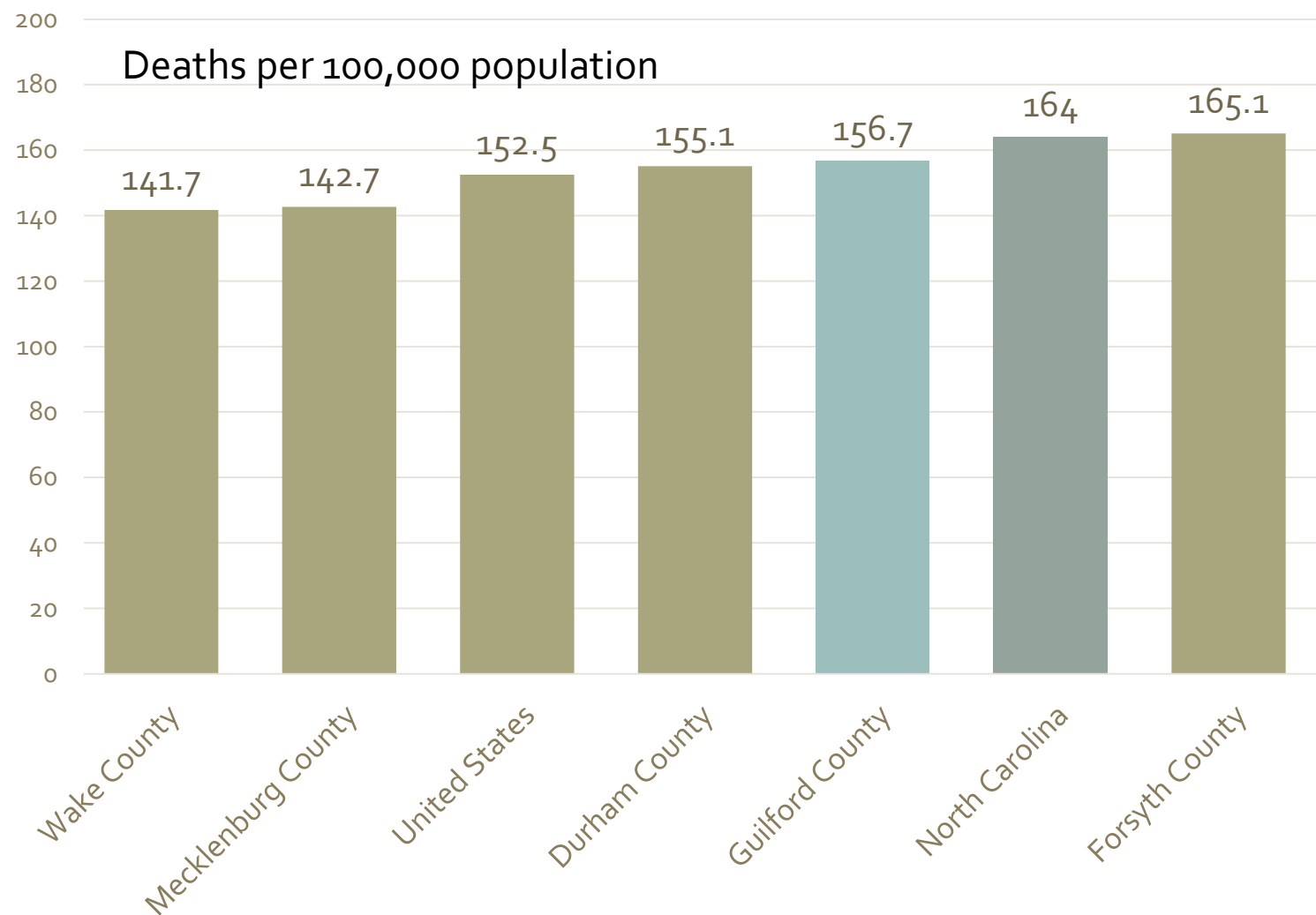
Age-adjusted heart disease mortality rates by race



Sources: SCHS Databook, 2013-2017.

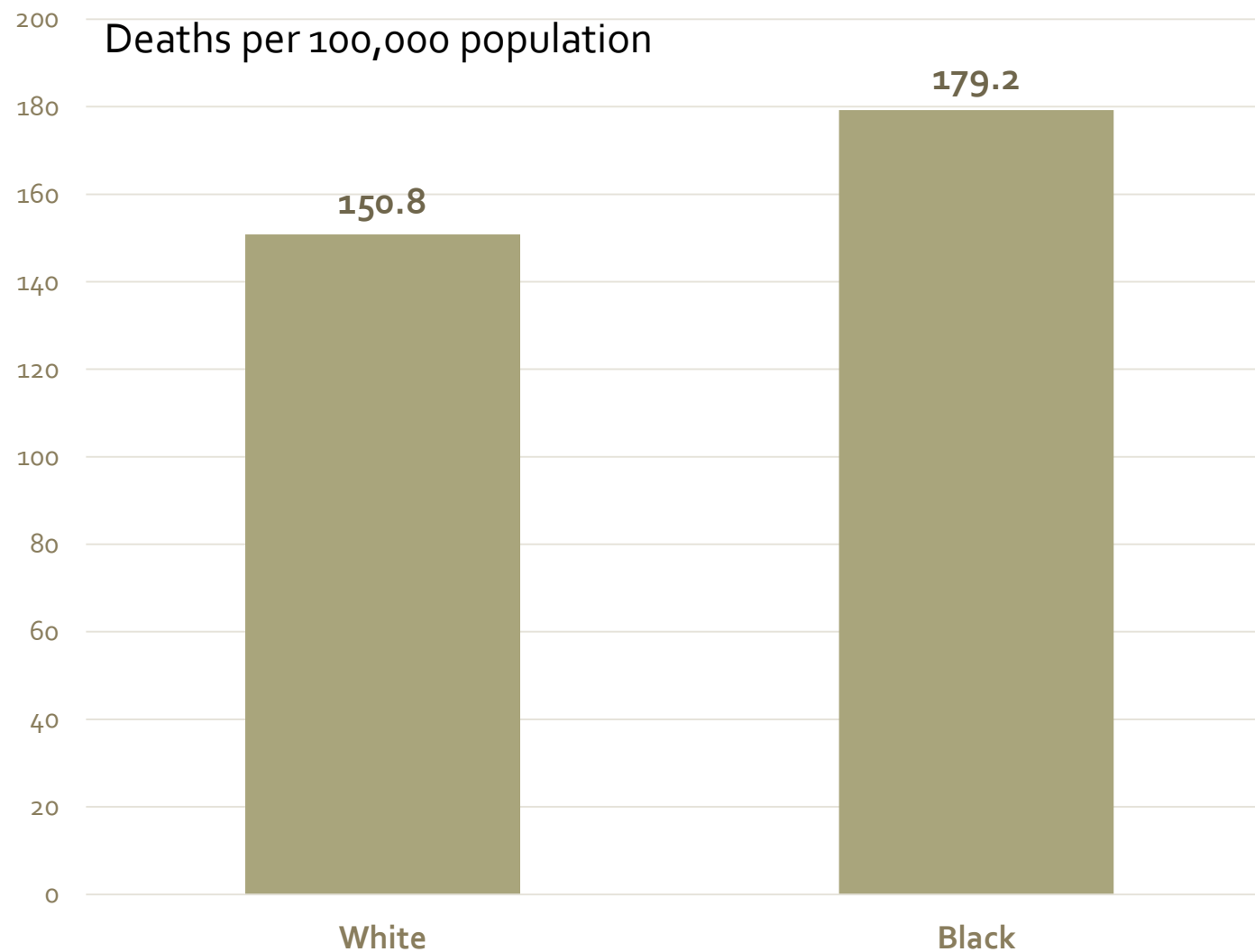
Chart prepared by the GCDHHS, Division of Public Health.

Age-adjusted cancer mortality rates by county



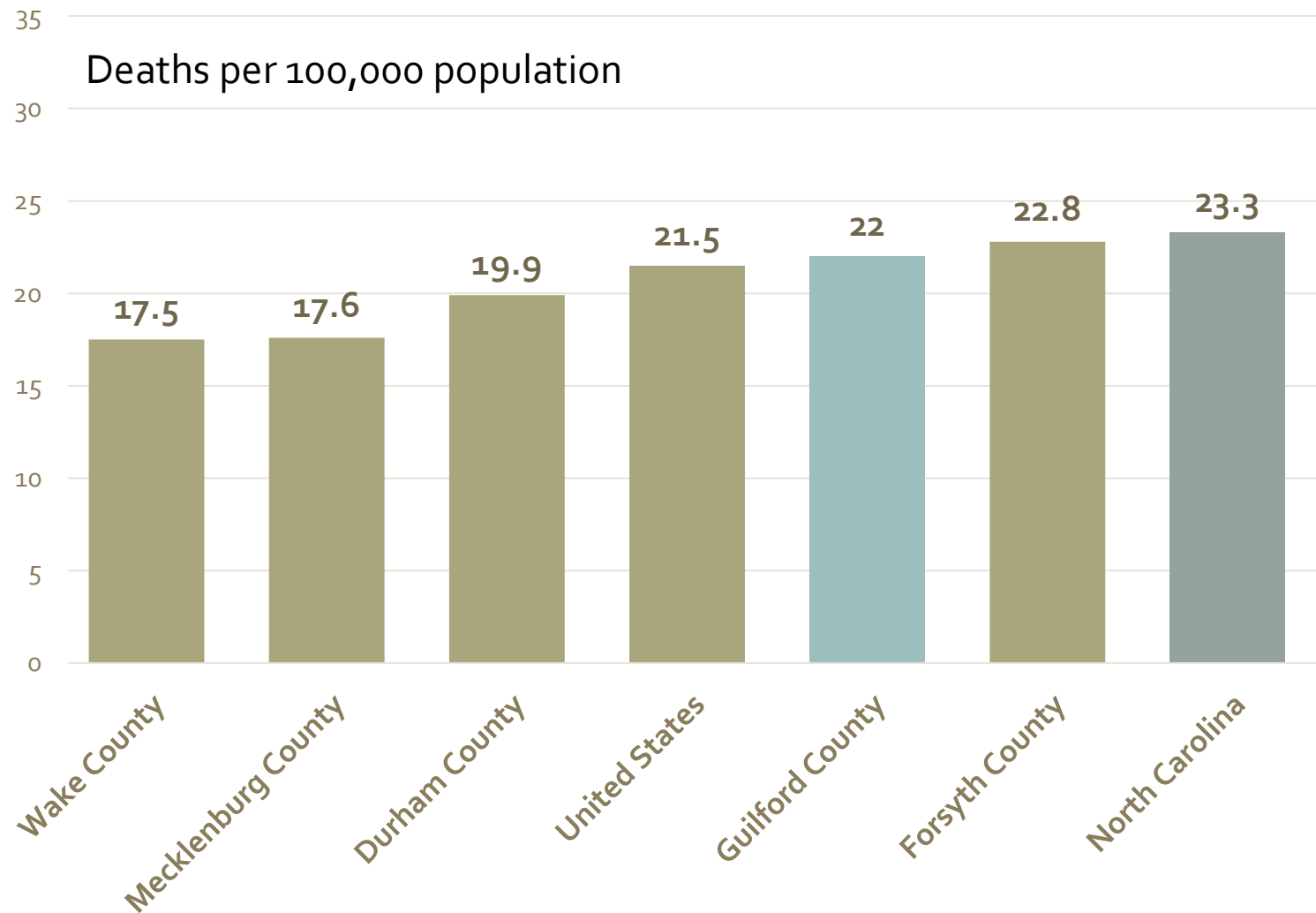
Sources: SCHS Databook, 2013-2017, CDC Report 2017 (US Rate).
Chart prepared by the GCDHHS, Division of Public Health.

Age-adjusted cancer mortality rates by race



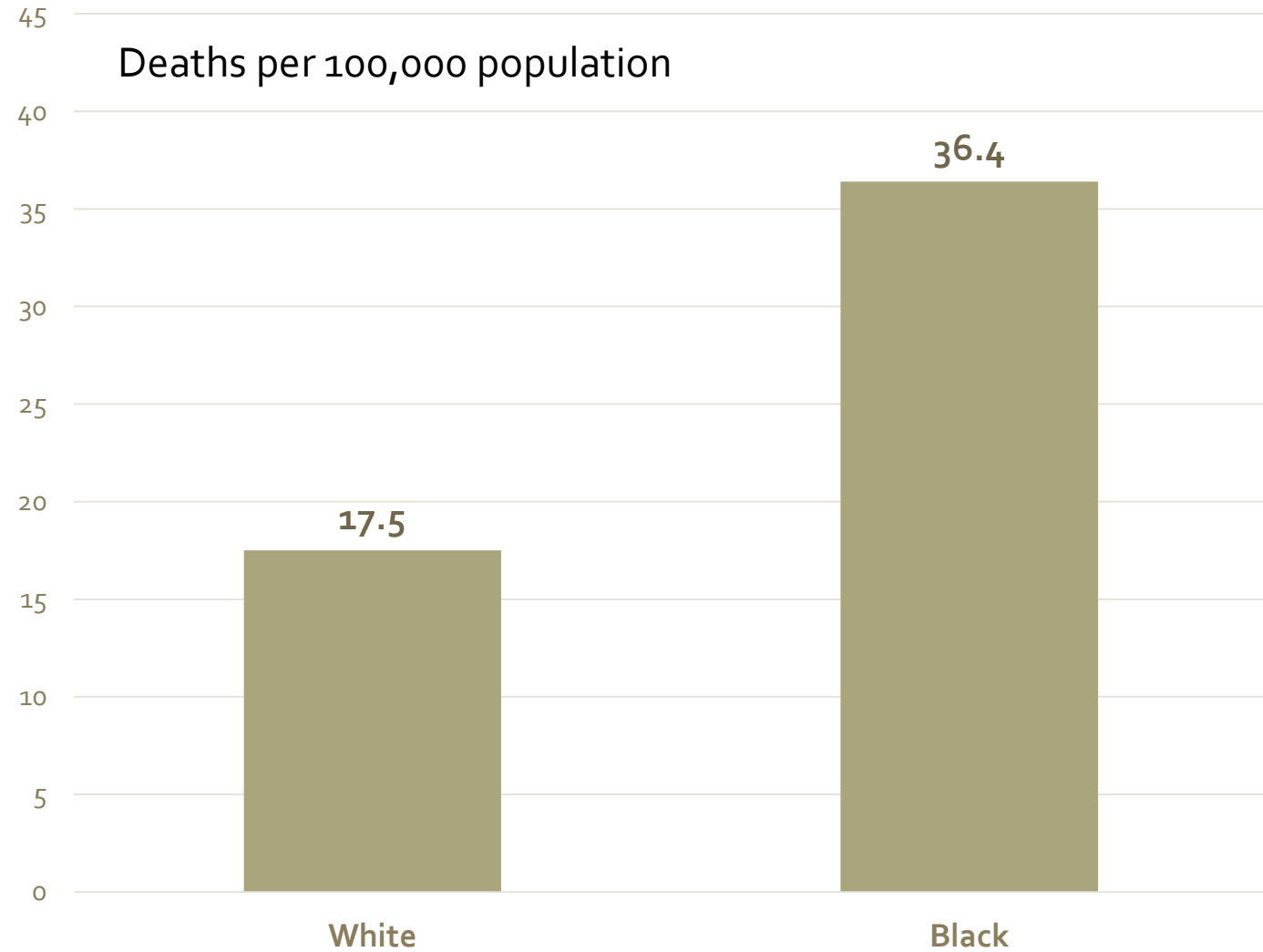
Sources: SCHS Databook, 2013-2017.
Chart prepared by the GCDHHS, Division of Public Health.

Age-adjusted diabetes mortality rates by county



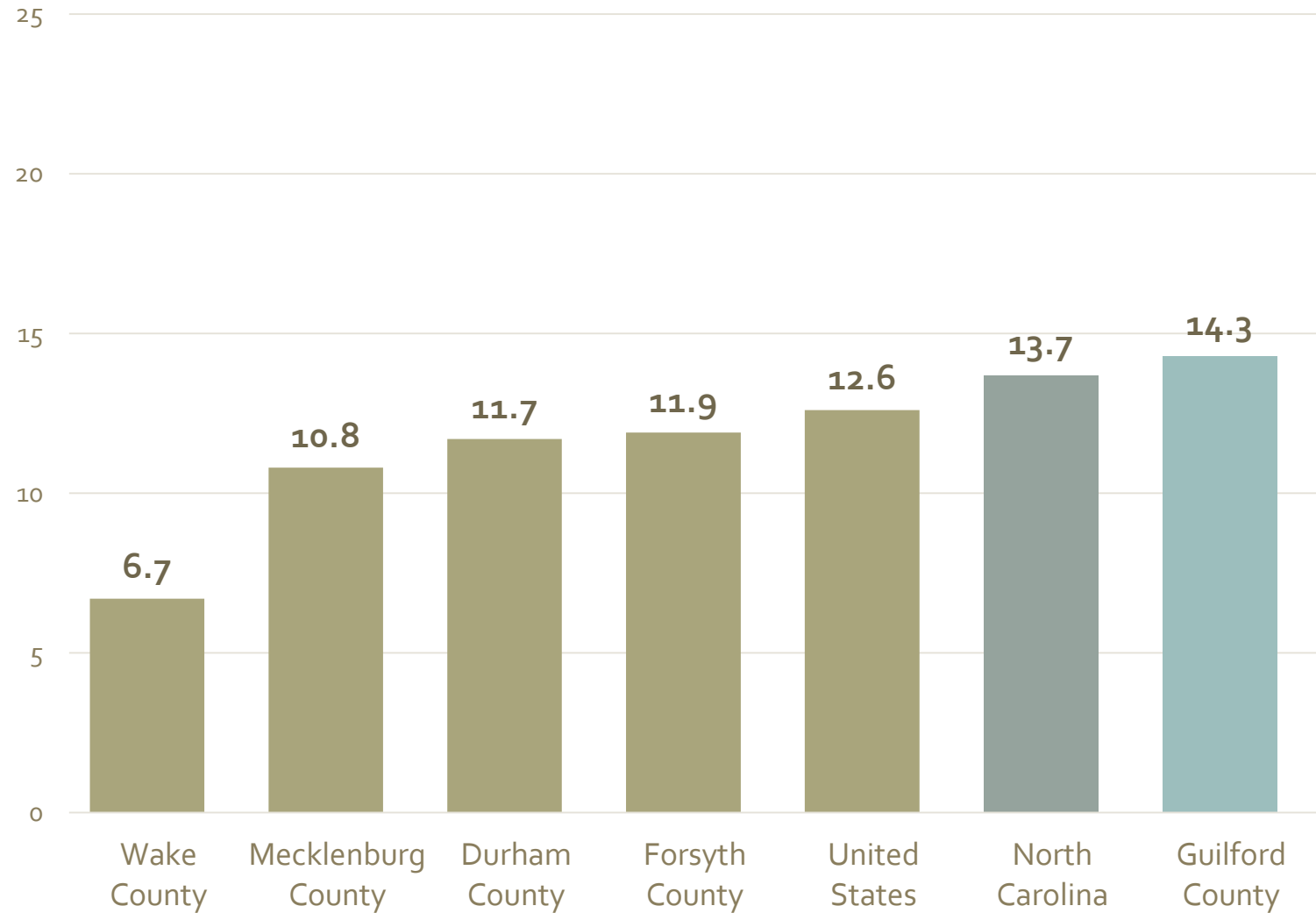
Sources: SCHS Databook, 2013-2017, CDC Report 2017 (US Rate).
Chart prepared by the GCDHHS, Division of Public Health.

Age-adjusted diabetes mortality rates by race



Sources: NC State Center for Health Statistics County Databook, 2013-2017.
Chart prepared by the GCDHHS, Division of Public Health.

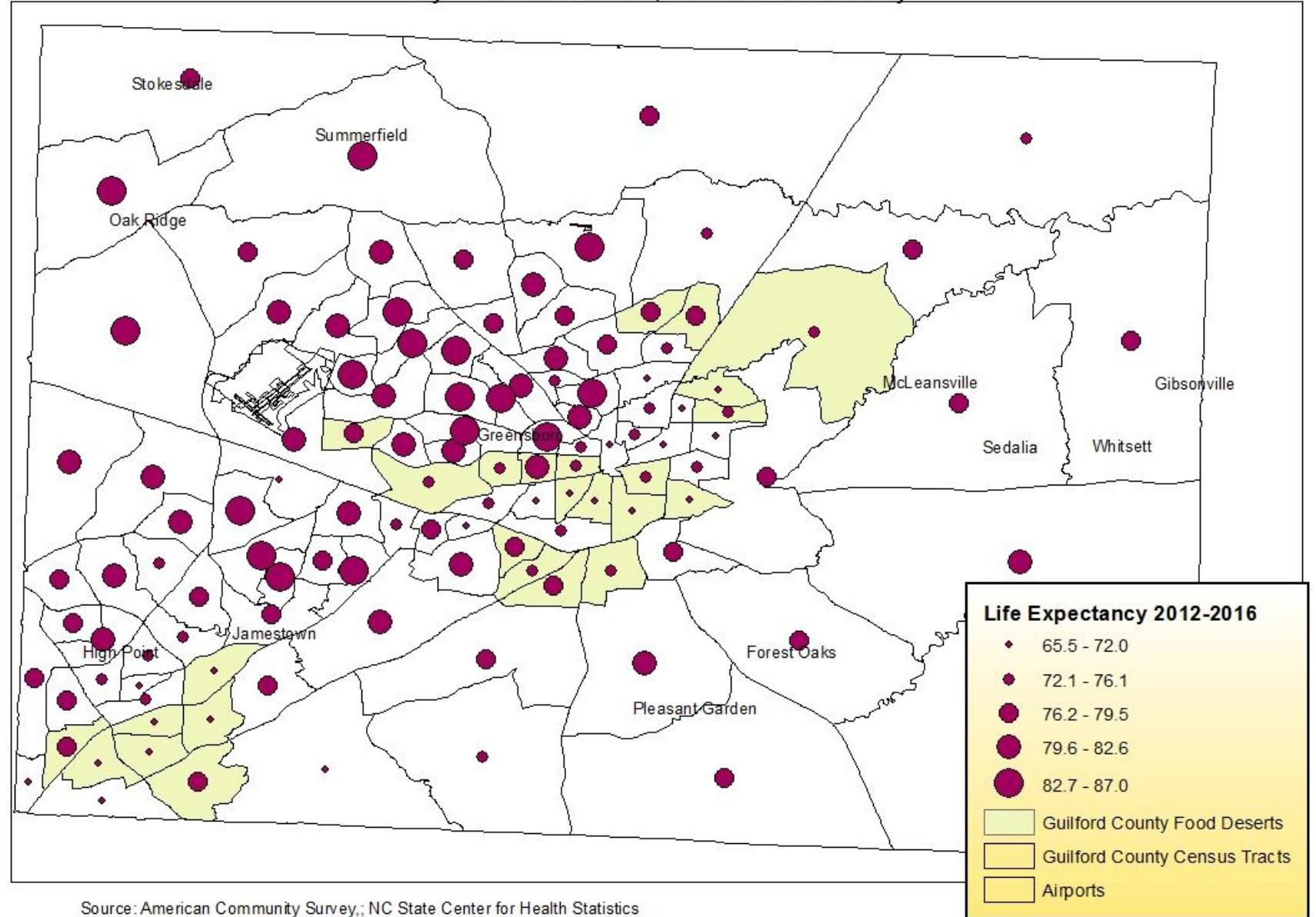
Percent of households with SNAP benefits, county comparisons



Sources: American Community Survey 2013-2017.
Chart prepared by the GCDHHS, Division of Public Health.

Food Deserts and Life Expectancy

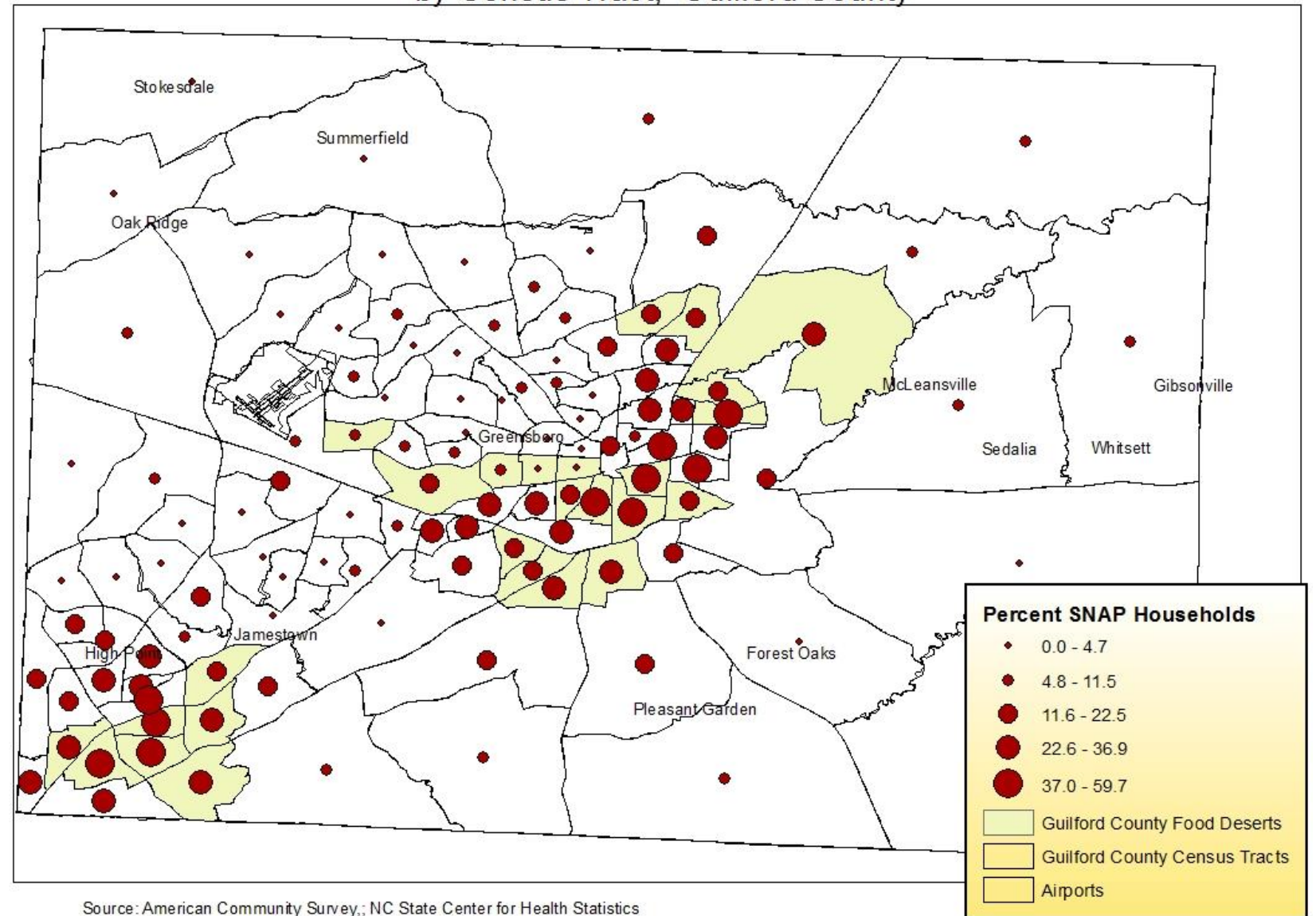
Life Expectancy and Food Deserts in Guilford County
by Census Tract, Guilford County



Map prepared by the GCDHHS, Division of Public Health.

Food Deserts and SNAP Households

Food Deserts in Guilford County and Percent of Households with SNAP
by Census Tract, Guilford County

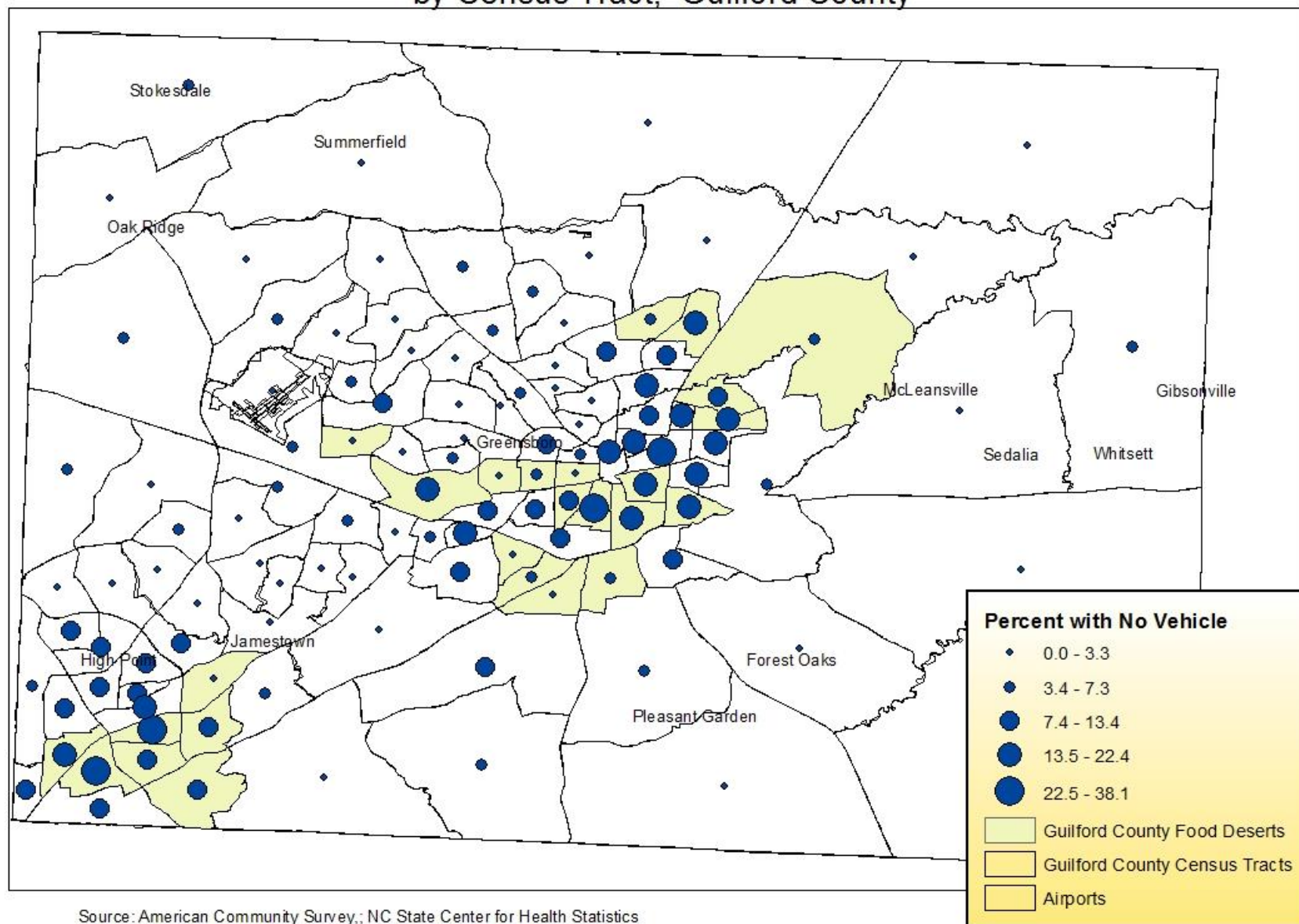


Source: American Community Survey, NC State Center for Health Statistics

Map prepared by the GCDHHS, Division of Public Health.

Food Deserts and Households with No Vehicle Available

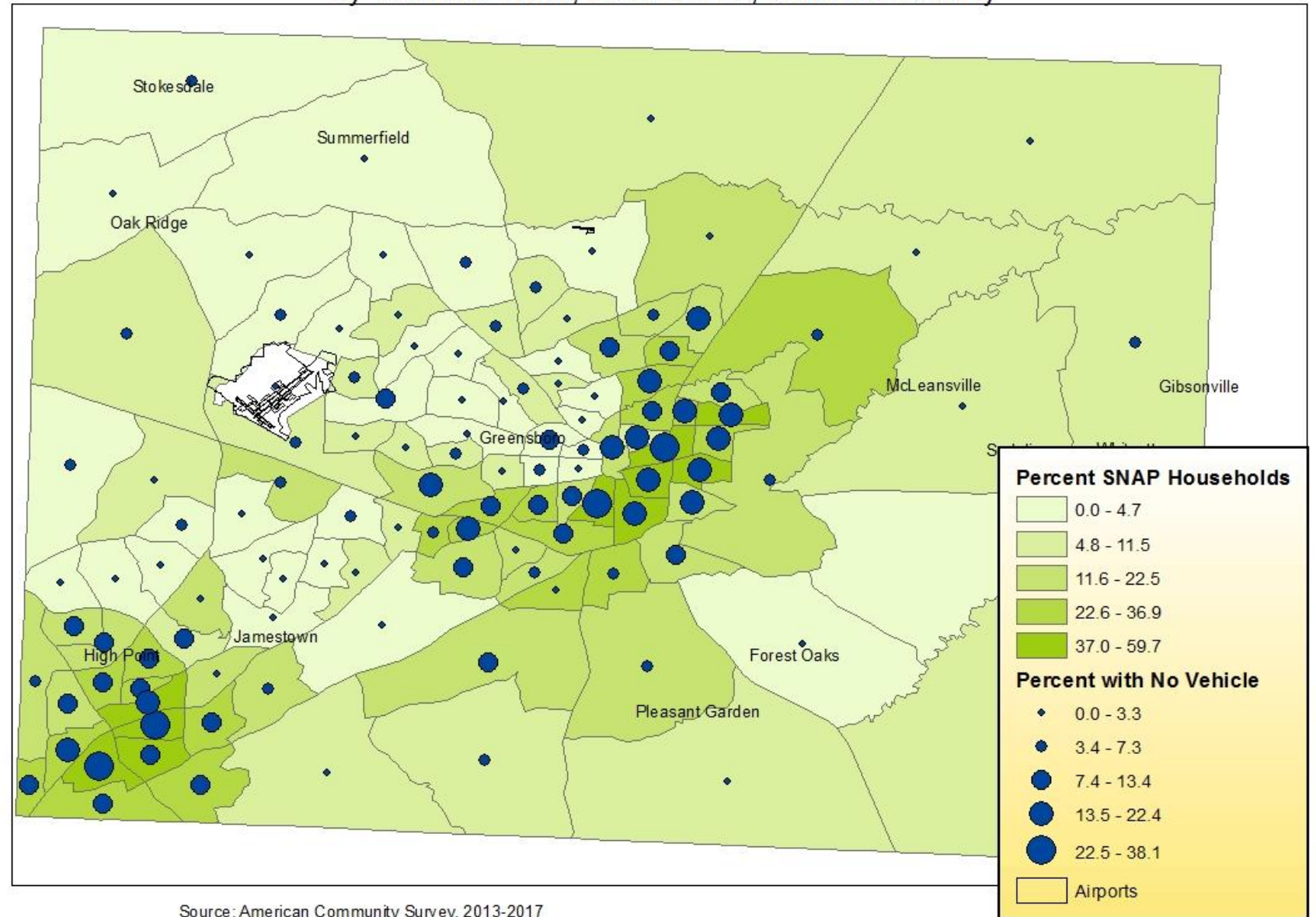
Food Deserts in Guilford County and Percent of Households with No Vehicle Available by Census Tract, Guilford County



Source: American Community Survey, NC State Center for Health Statistics

Percent of Households with SNAP and Households with No Vehicle Available

Percent of Households with SNAP, with No Vehicle Available Percentage by Census Tract, 2013-2017, Guilford County



Source: American Community Survey, 2013-2017

Map prepared by the GCDHHS, Division of Public Health.

Going Forward

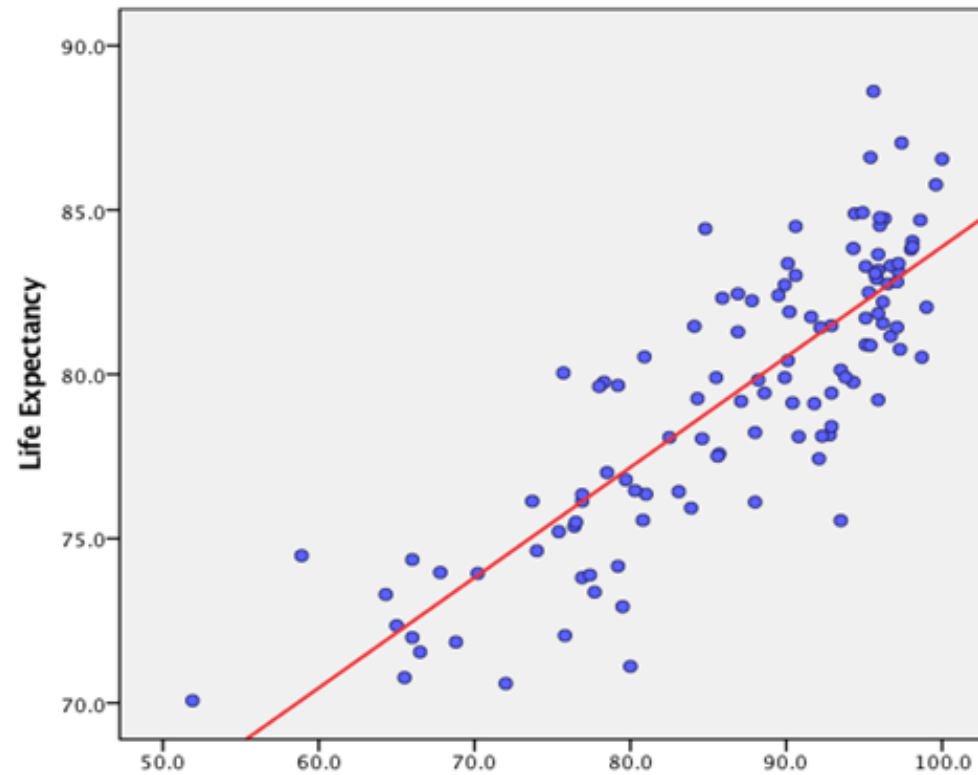
- What are the key issues that need to be addressed in order to “move the needle” on improved nutrition and physical activity?
- Are there gaps and needs in programs and policies that need to be looked at?
- What is working to promote healthy eating and active living?
- What are promising approaches that could be taken?

2019 Guilford County Community Health Assessment

Appendix F1

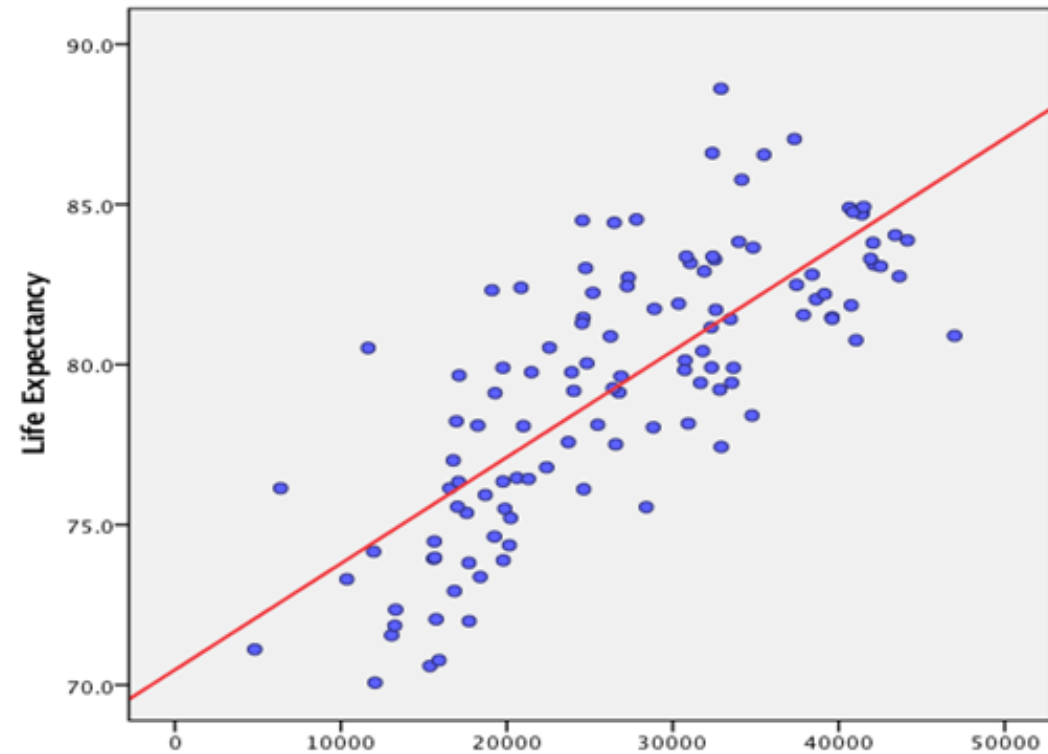
Education and Economic Health

Figure 5: Average Life Expectancy per Census Tract by Education



Percent of Residents over 25 with a High School Degree or Higher

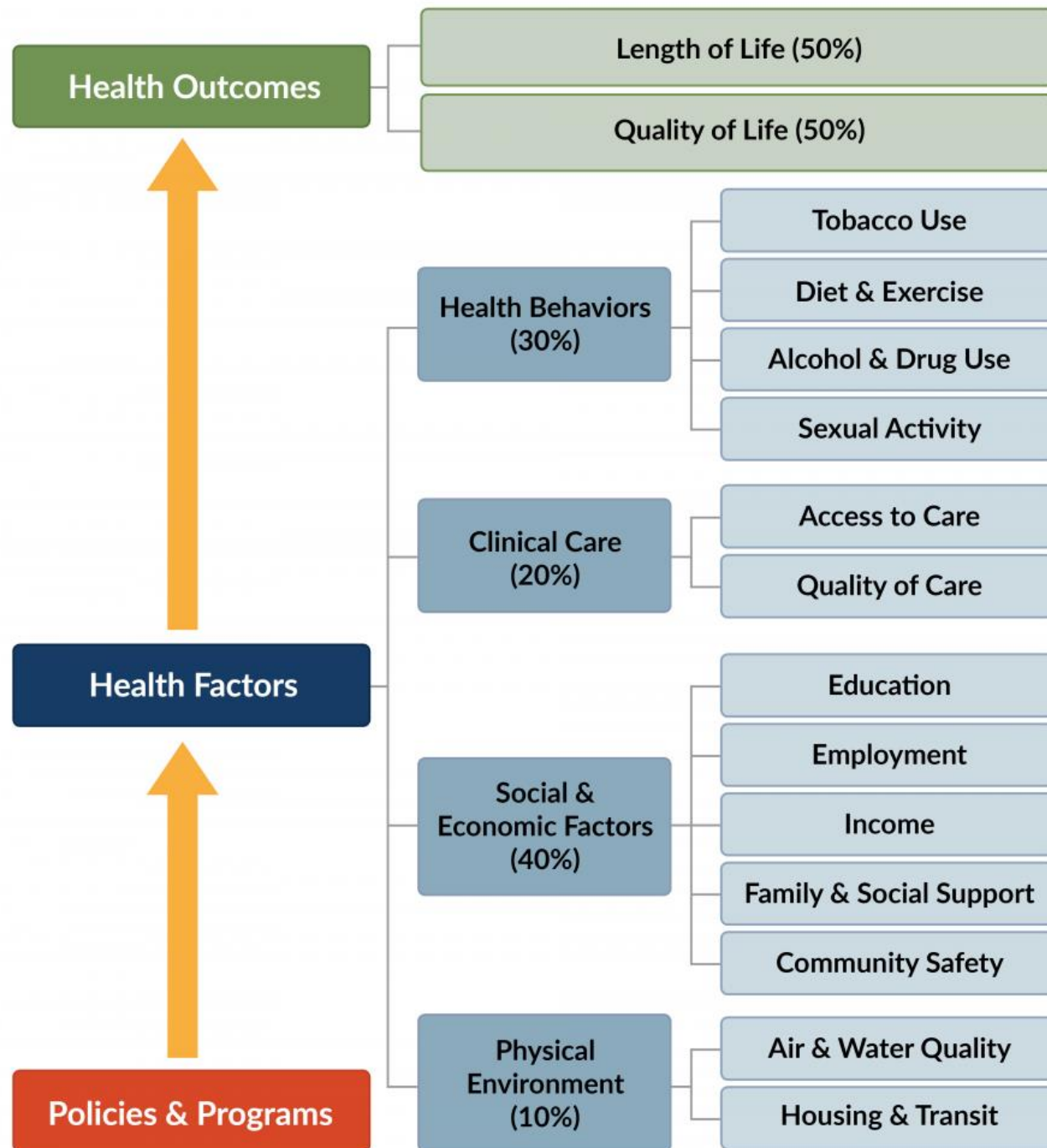
Figure 6: Average Life Expectancy per Census Tract by Income



Median Income

Sources: US Census Bureau, American Community Survey 2009-2013; North Carolina State Center for Health Statistics, 2013*[4-7].

Why are Social Determinants of Health Important?

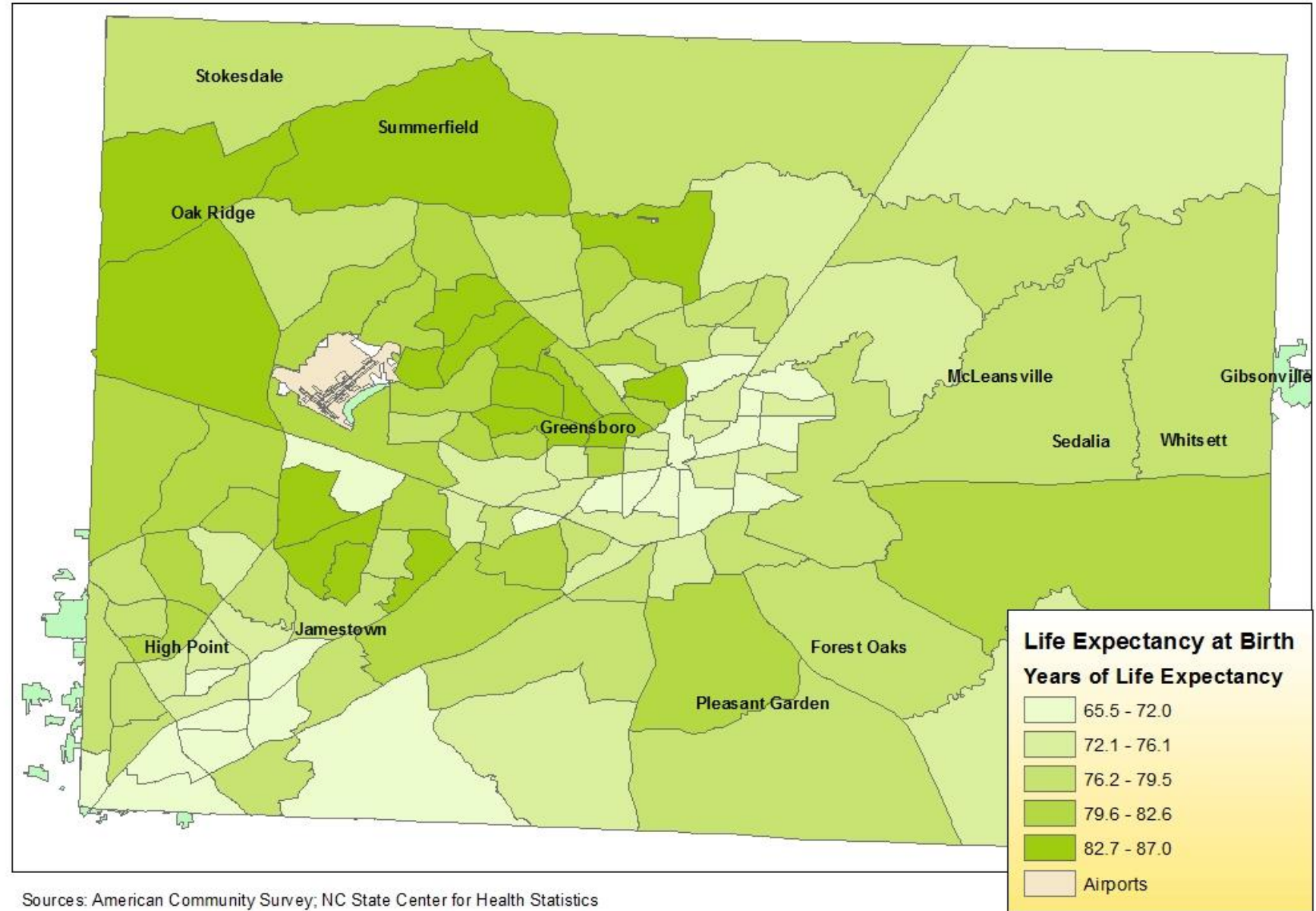


Education and Economic Health

2019 Guilford County Community Health Assessment

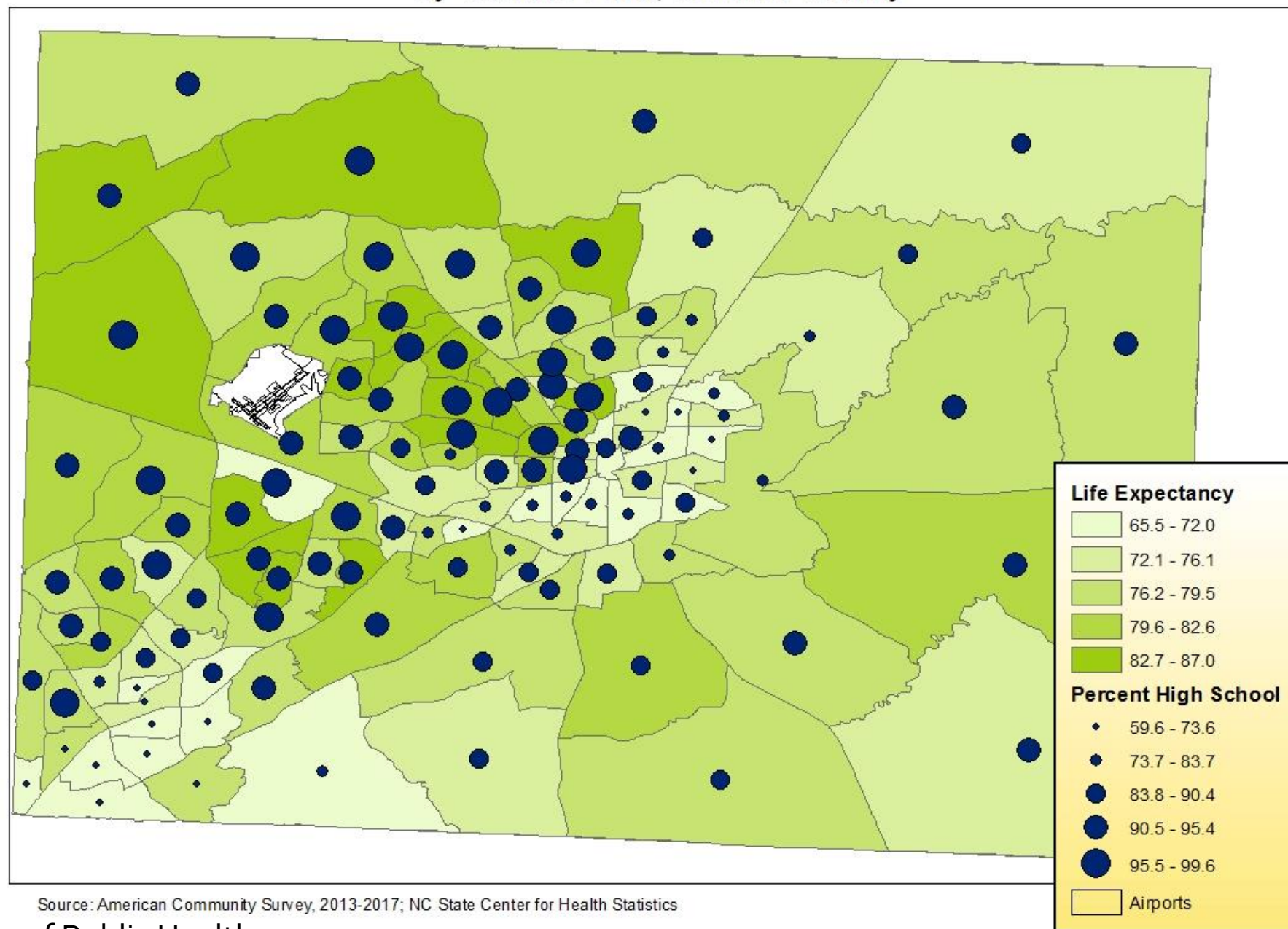
Life Expectancy at Birth, by Census Tract, Guilford County, 2012-2016

Life Expectancy at Birth by Census Tract



Education and Life Expectancy

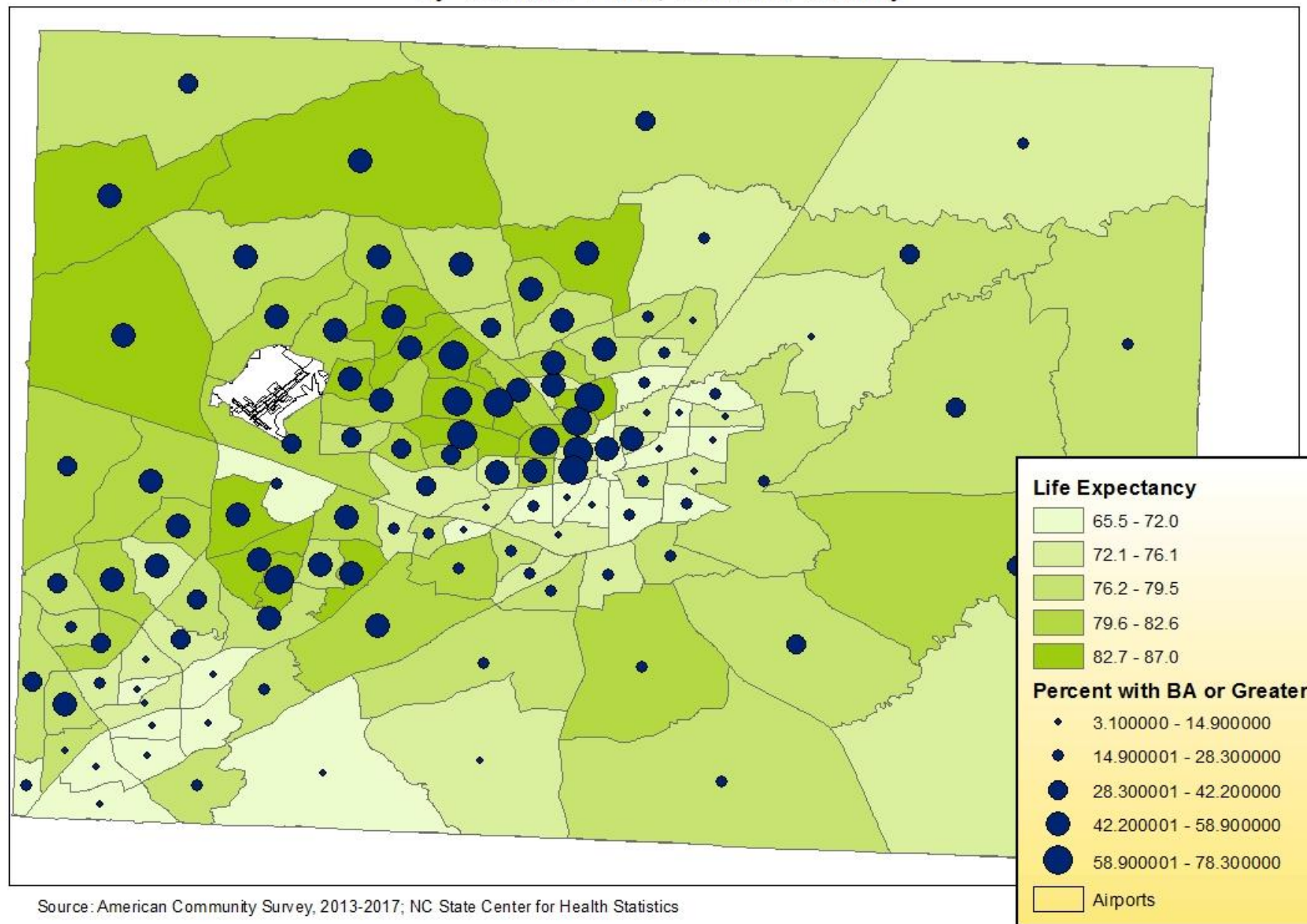
Life Expectancy and Percent with High School or Greater, by Census Tract
by Census Tract, Guilford County



Map prepared by GCDHHS, Division of Public Health.

Education and Life Expectancy

Life Expectancy and Percent with BA or Greater, by Census Tract
by Census Tract, Guilford County

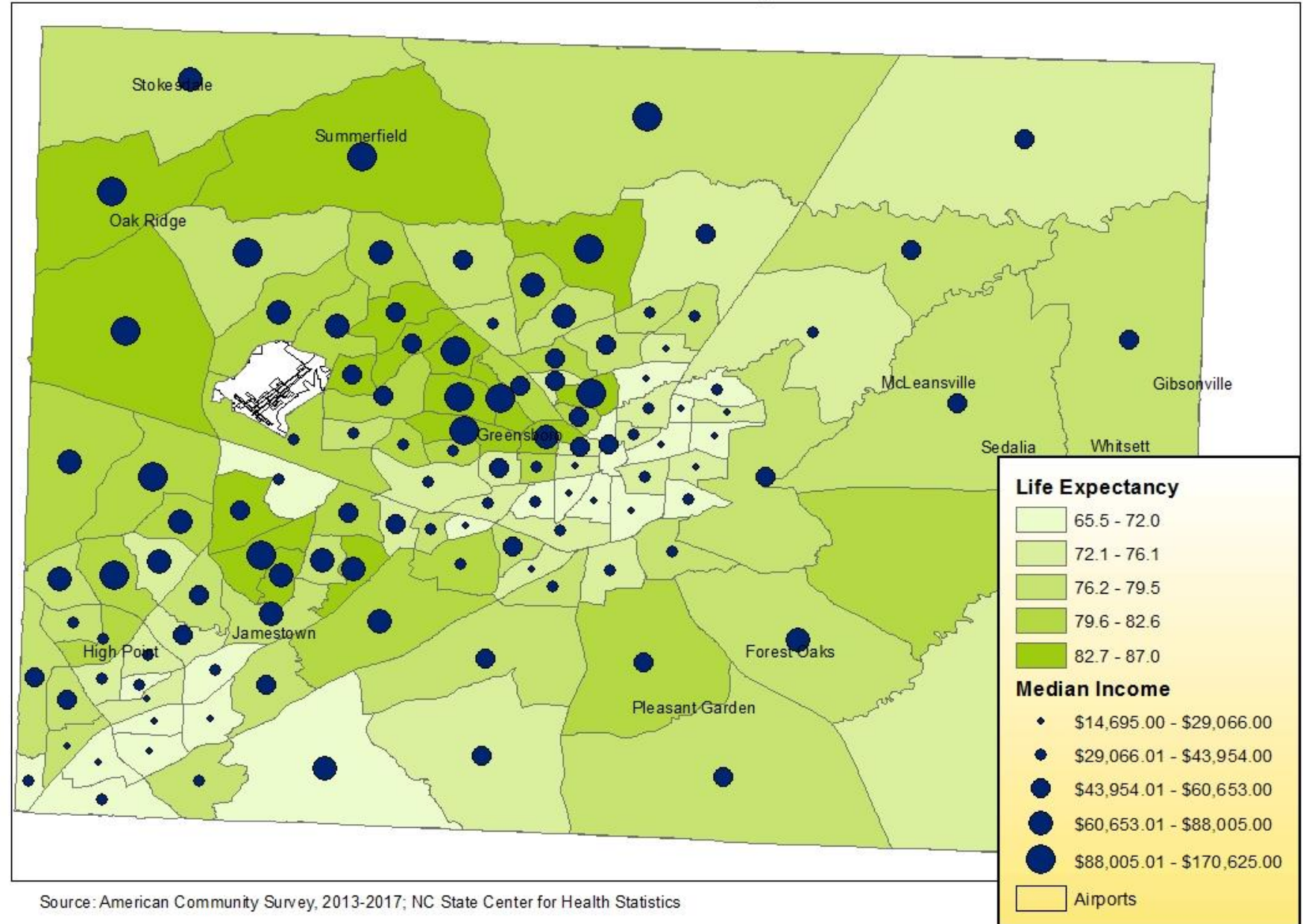


Source: American Community Survey, 2013-2017; NC State Center for Health Statistics

Map prepared by GCDHHS, Division of Public Health.

Income and Life Expectancy

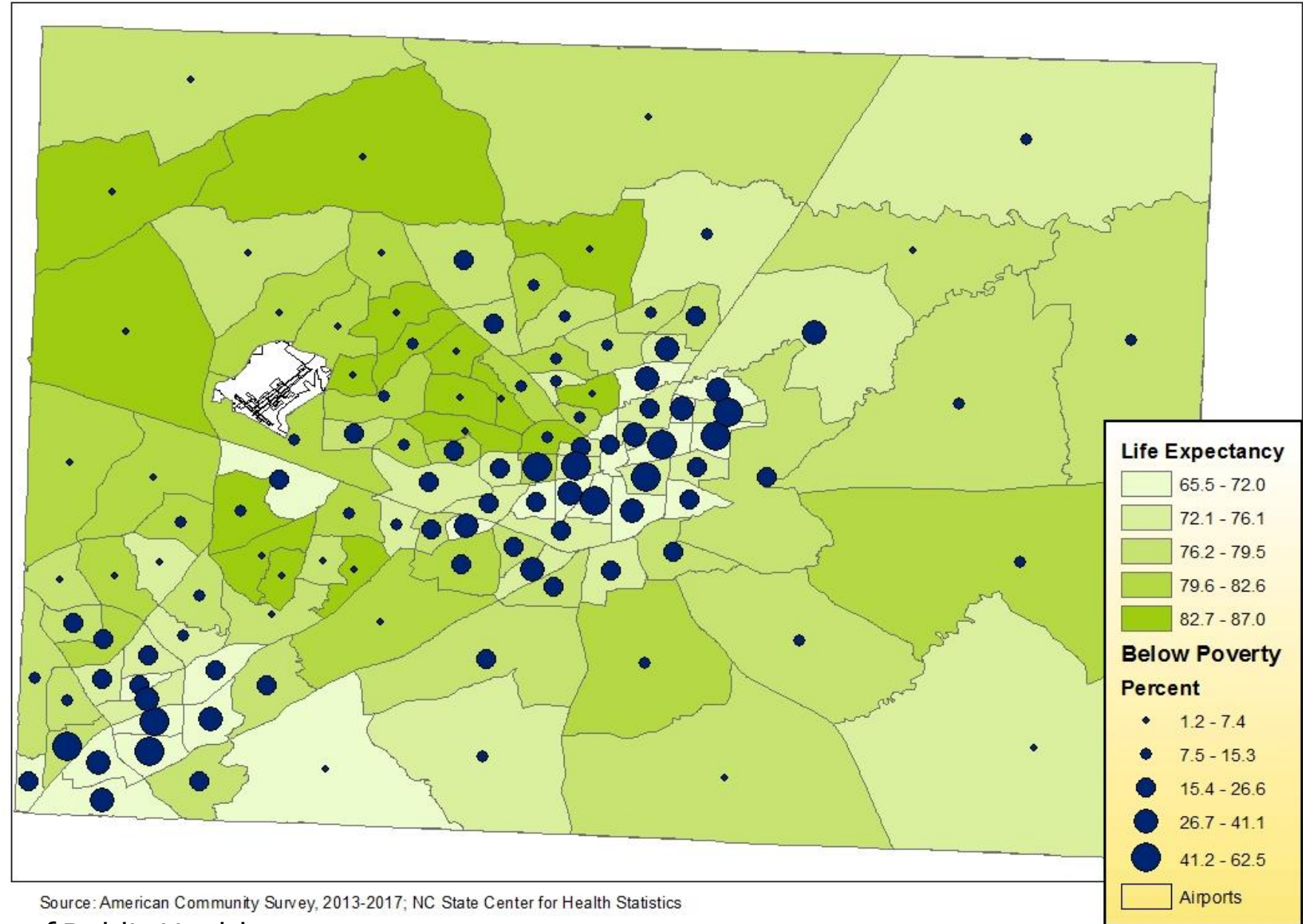
Life Expectancy and Median Household Income, by Census Tract, Guilford County



Map prepared by GCDHHS, Division of Public Health.

Poverty and Life Expectancy

Life Expectancy and Percent of Persons in Poverty, by Census Tract
by Census Tract, Guilford County

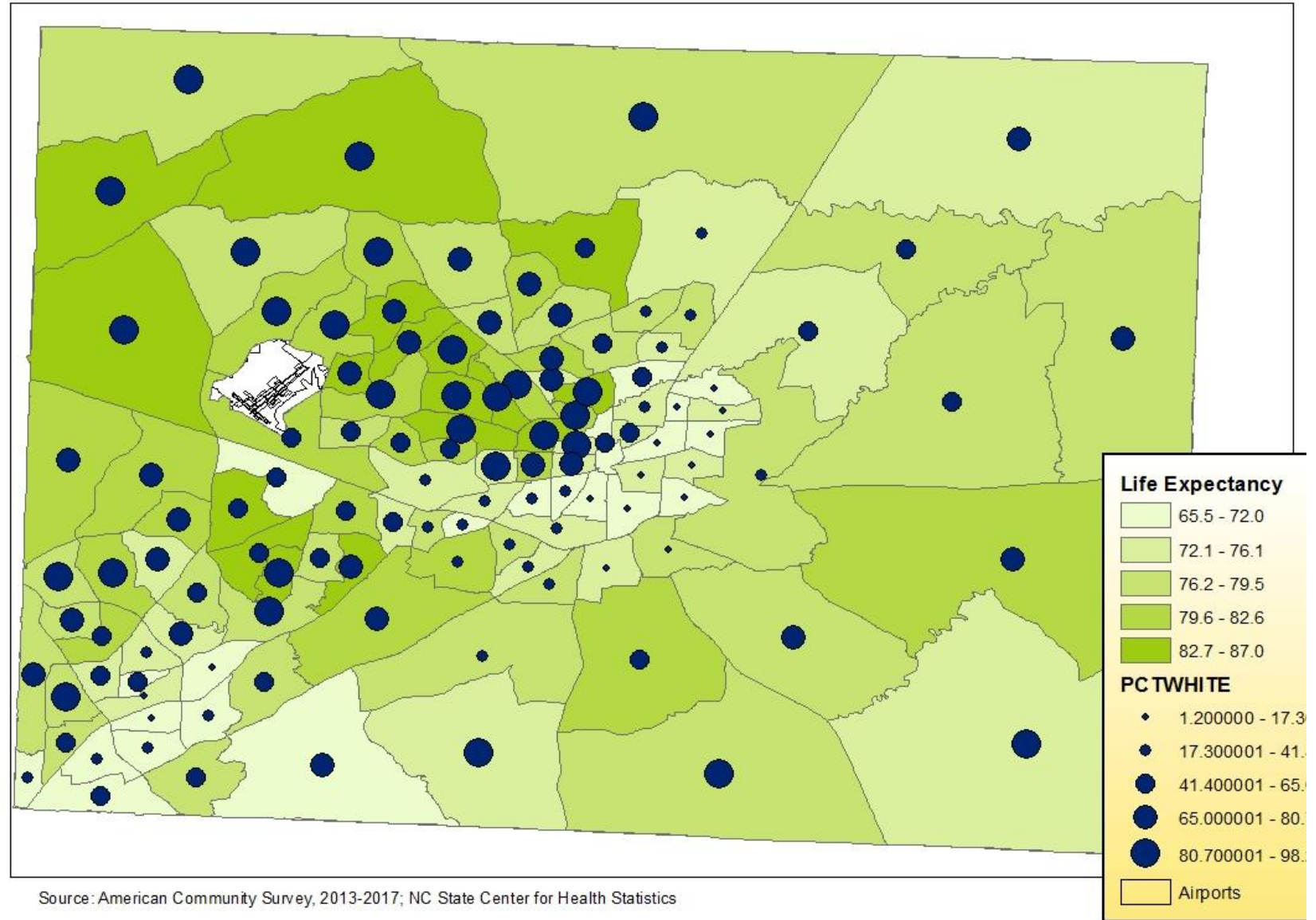


Source: American Community Survey, 2013-2017; NC State Center for Health Statistics

Map prepared by GCDHHS, Division of Public Health.

Race and Life Expectancy

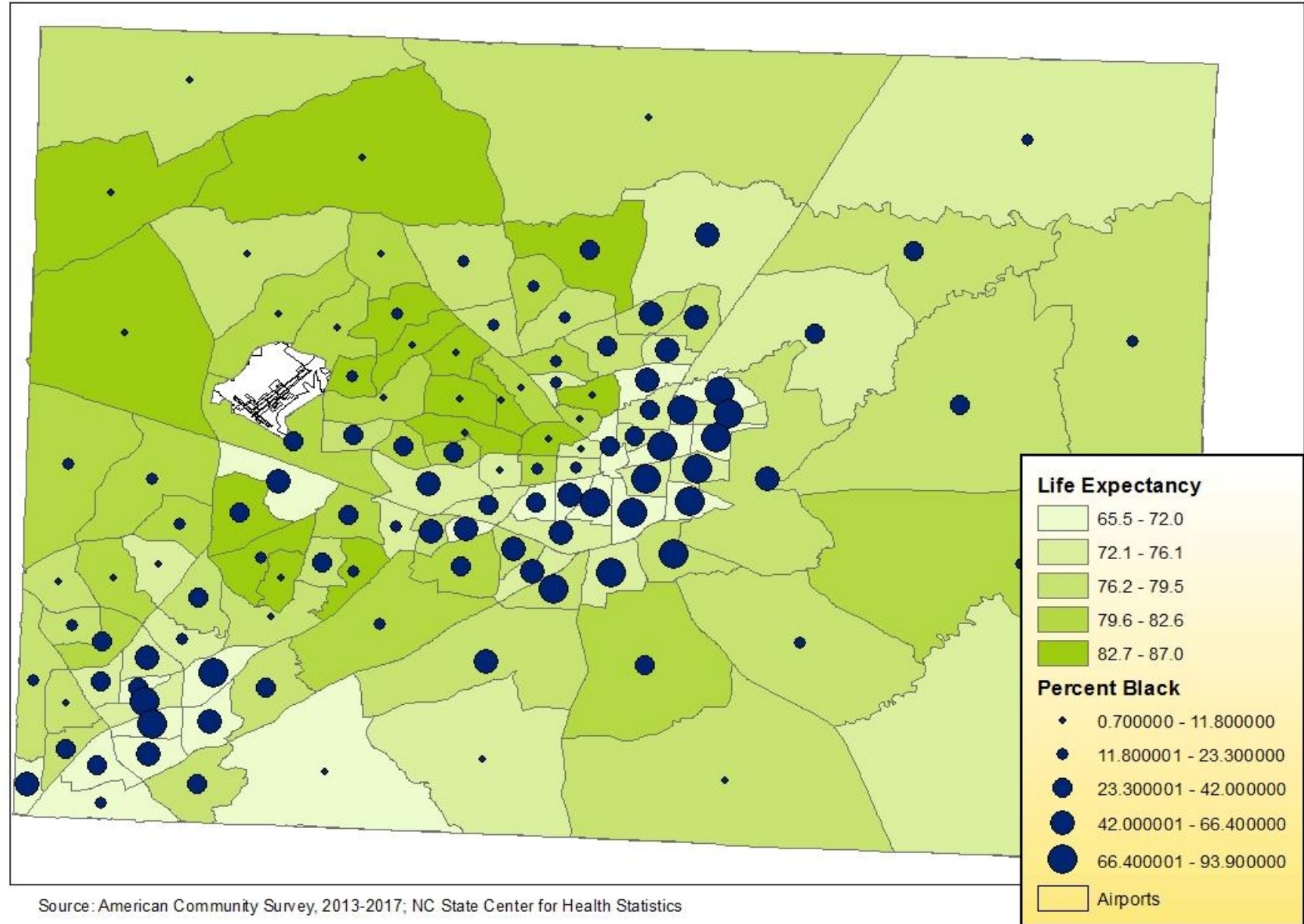
Life Expectancy and Percent White, by Census Tract
by Census Tract, Guilford County



Map prepared by GCDHHS, Division of Public Health.

Race and Life Expectancy

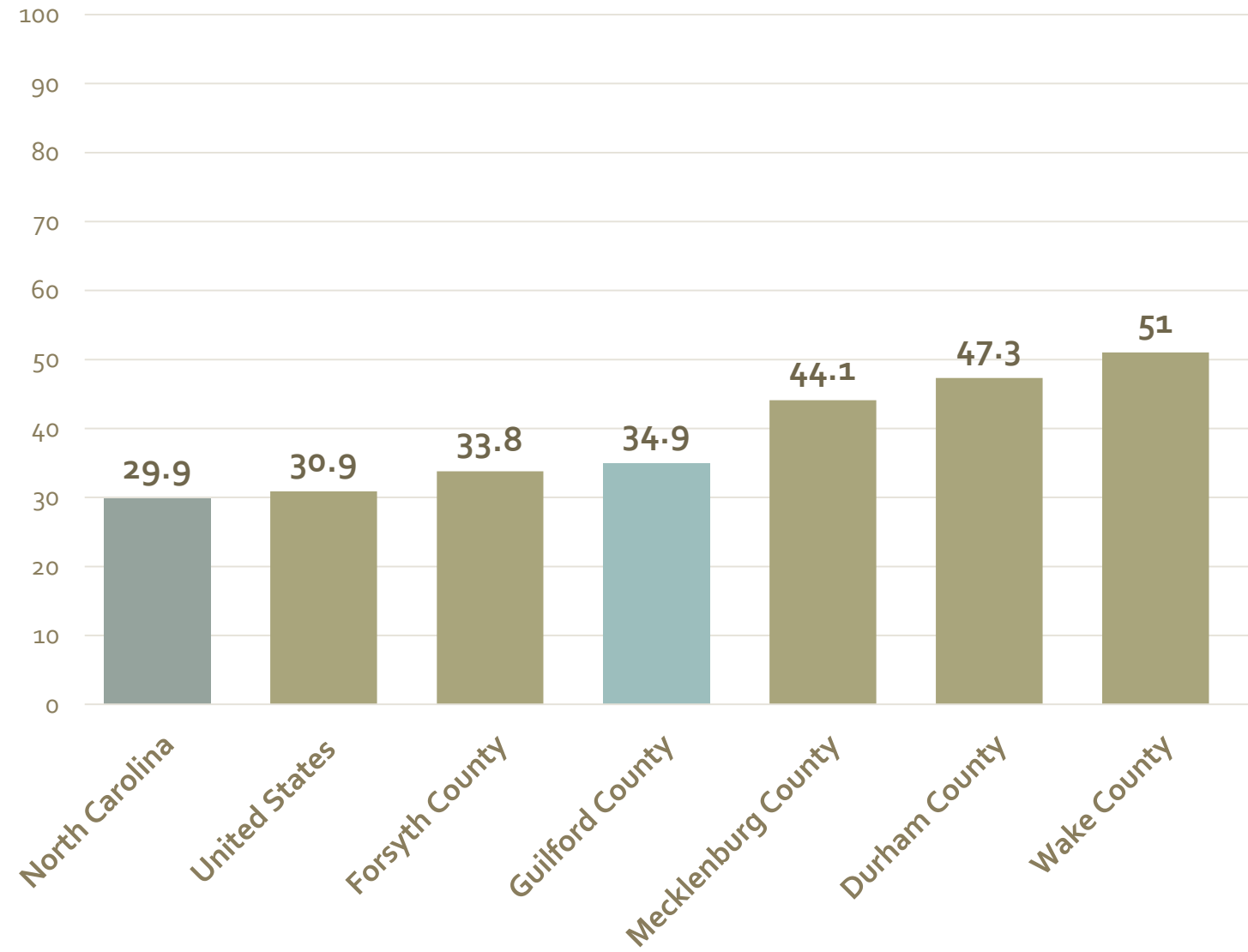
Life Expectancy and Percent Black, by Census Tract
by Census Tract, Guilford County



Source: American Community Survey, 2013-2017; NC State Center for Health Statistics

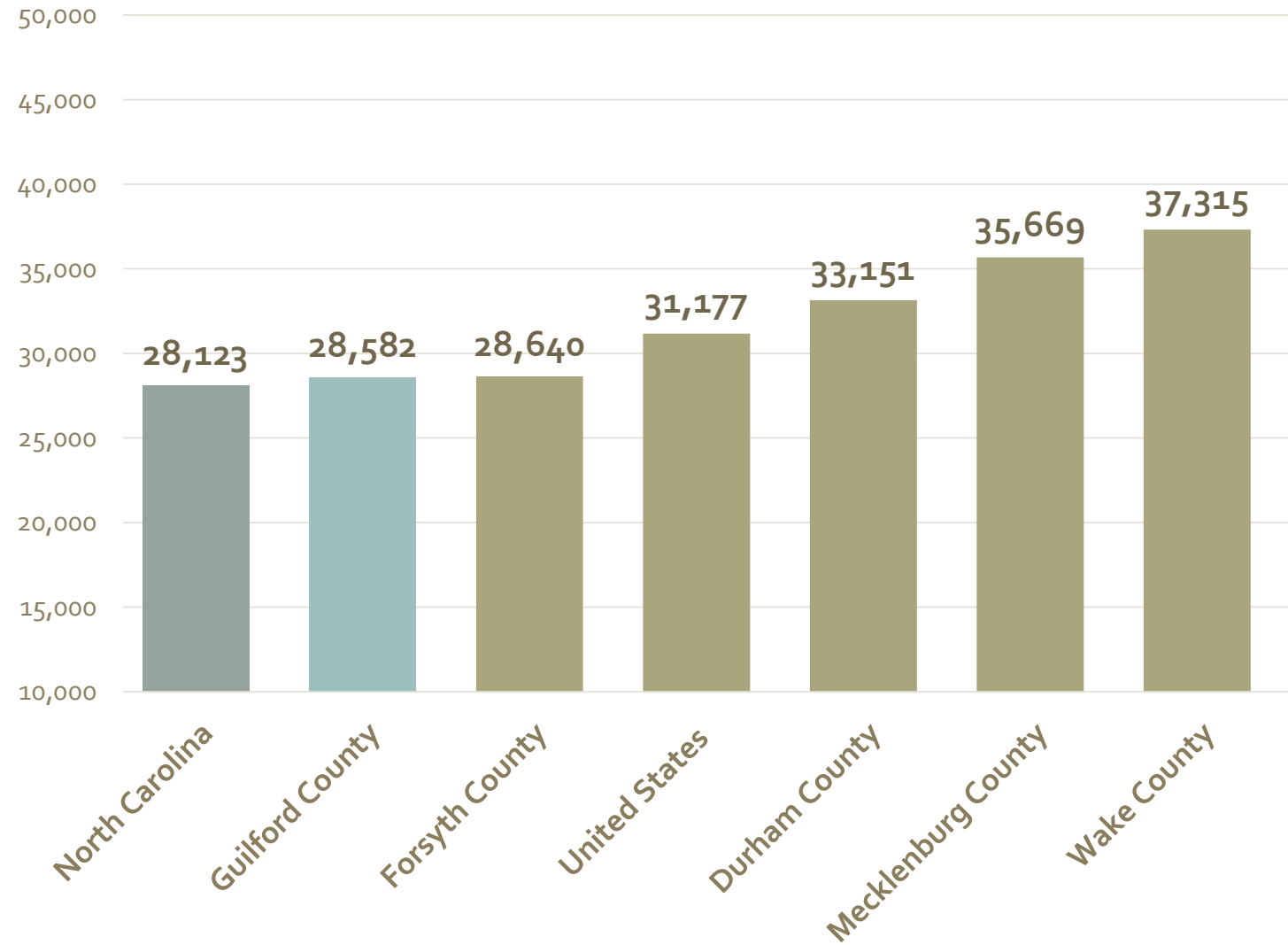
Map prepared by GCDHHS, Division of Public Health.

Percent of Adults Completing Bachelor's Degree or Higher, County Comparisons



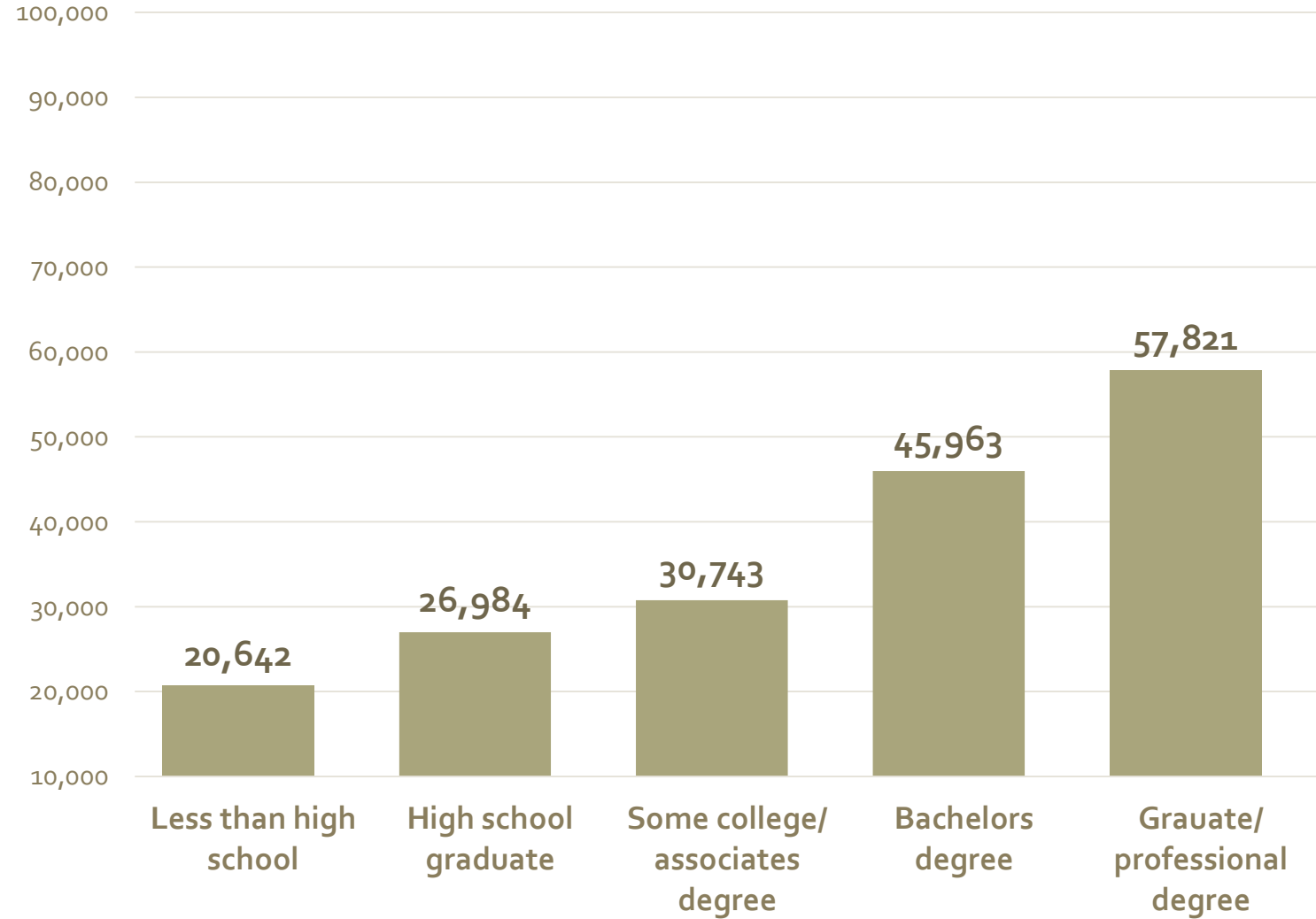
Source: American Community Survey, 2013-2017.
Chart prepared by GCDHHS, Division of Public Health.

Per Capita Income (\$), County Comparisons



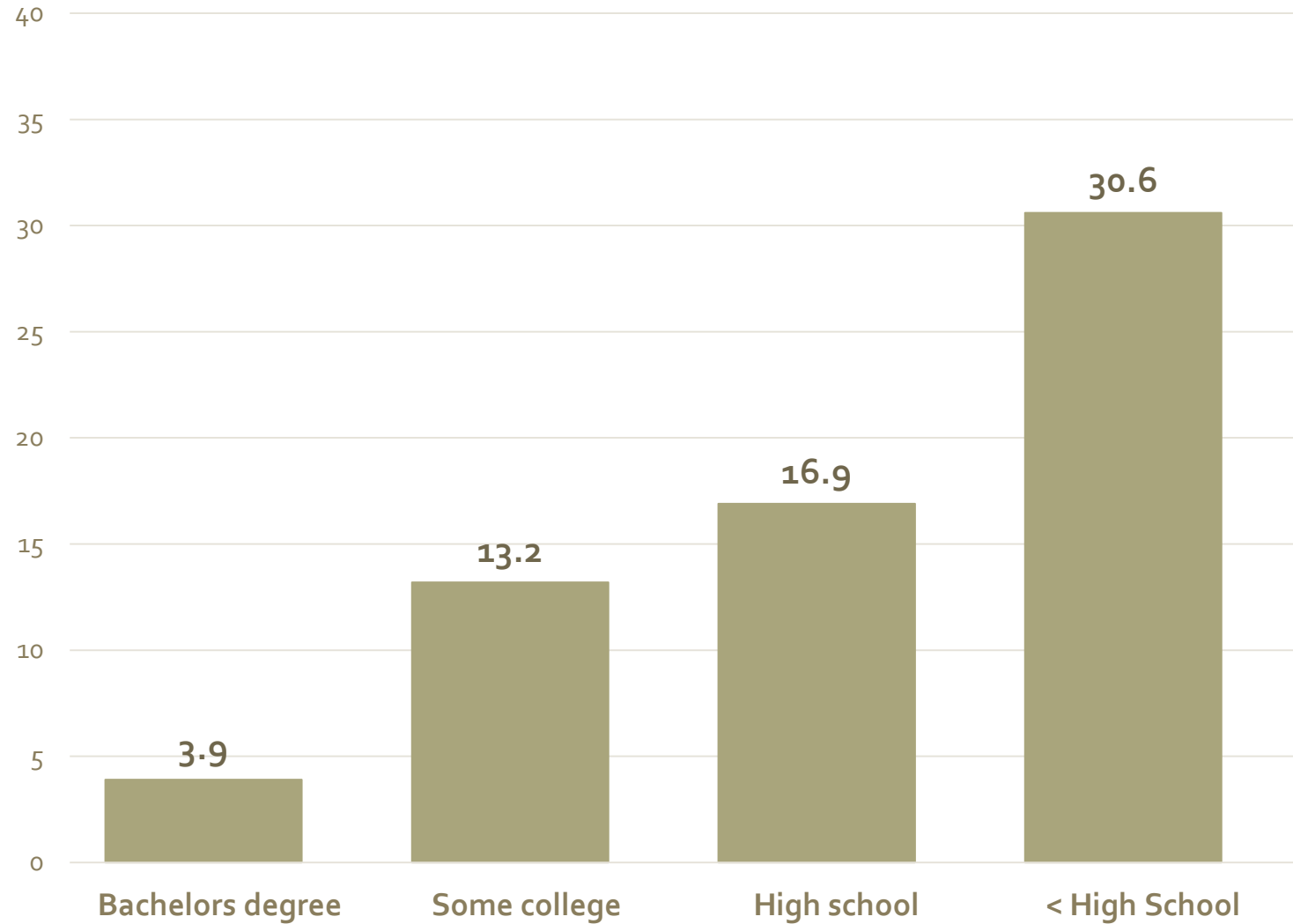
Source: American Community Survey, 2013-2017.
Chart prepared by GCDHHS, Division of Public Health.

Median Earnings (\$) by Educational Attainment, Guilford County



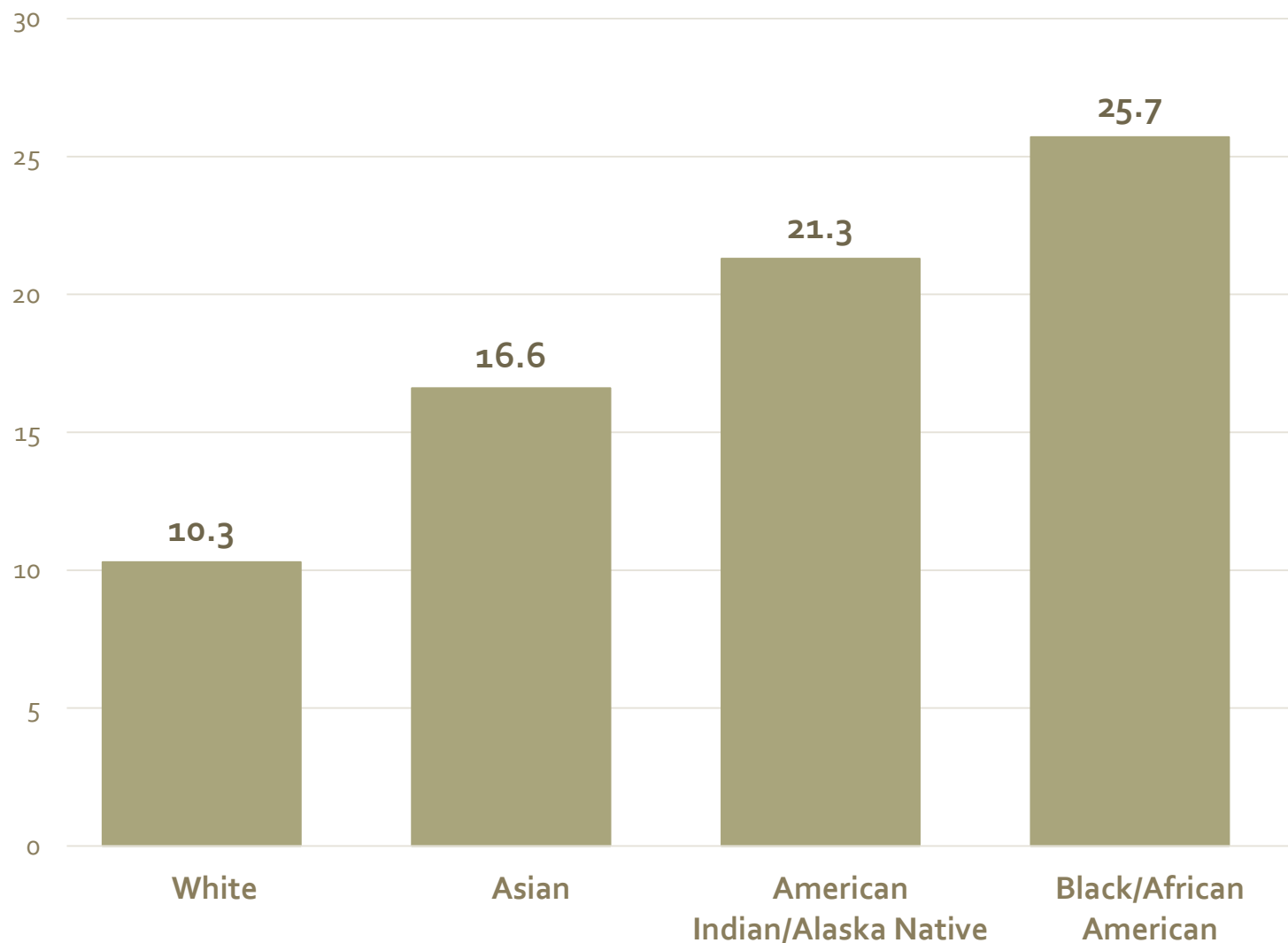
Source: American Community Survey, 2013-2017.
Chart prepared by GCDHHS, Division of Public Health.

Percent of All Persons below Poverty Level, by Educational Attainment, Guilford County



Source: American Community Survey, 2013-2017.
Chart prepared by GCDHHS, Division of Public Health.

Percent of All Persons below Poverty, by Race, Guilford County, 2013-2017



Source: American Community Survey, 2013-2017.
Chart prepared by GCDHHS, Division of Public Health.

The Intersection Between Health and Housing

Dr. Stephen J. Sills

*Director, Center for Housing and
Community Studies*

CHA Appendix F2

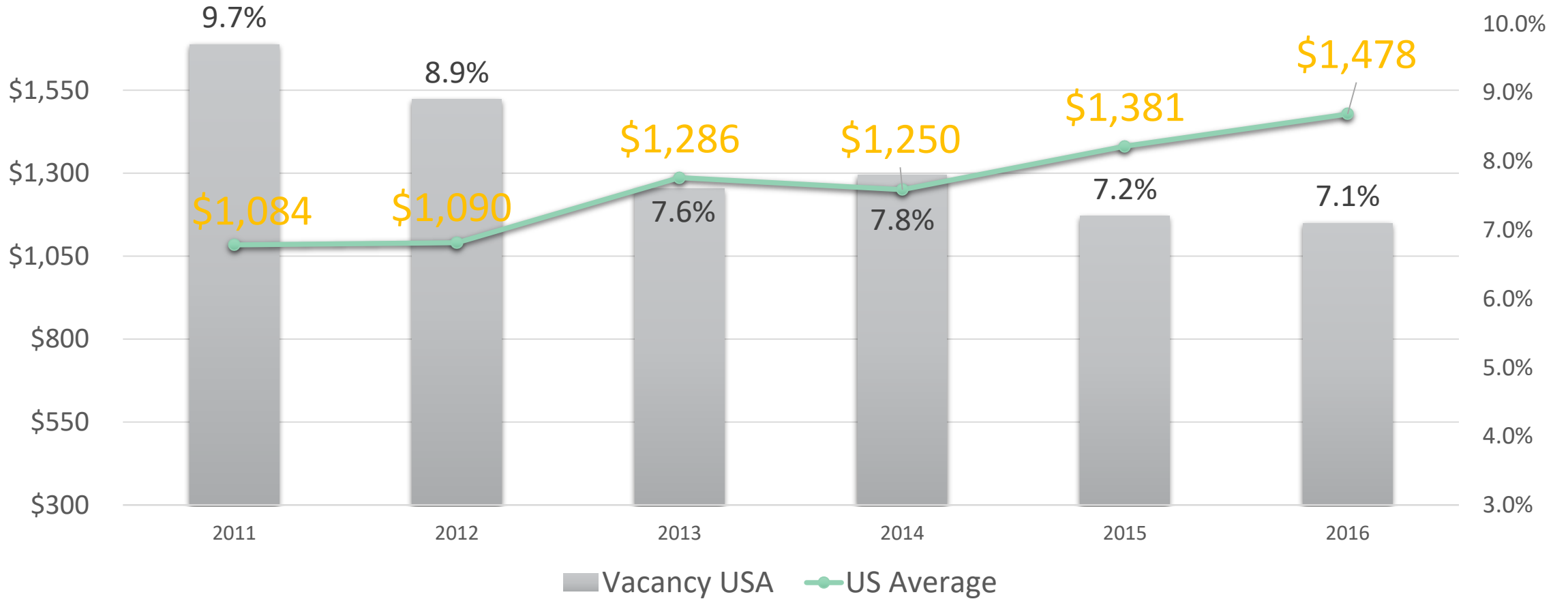


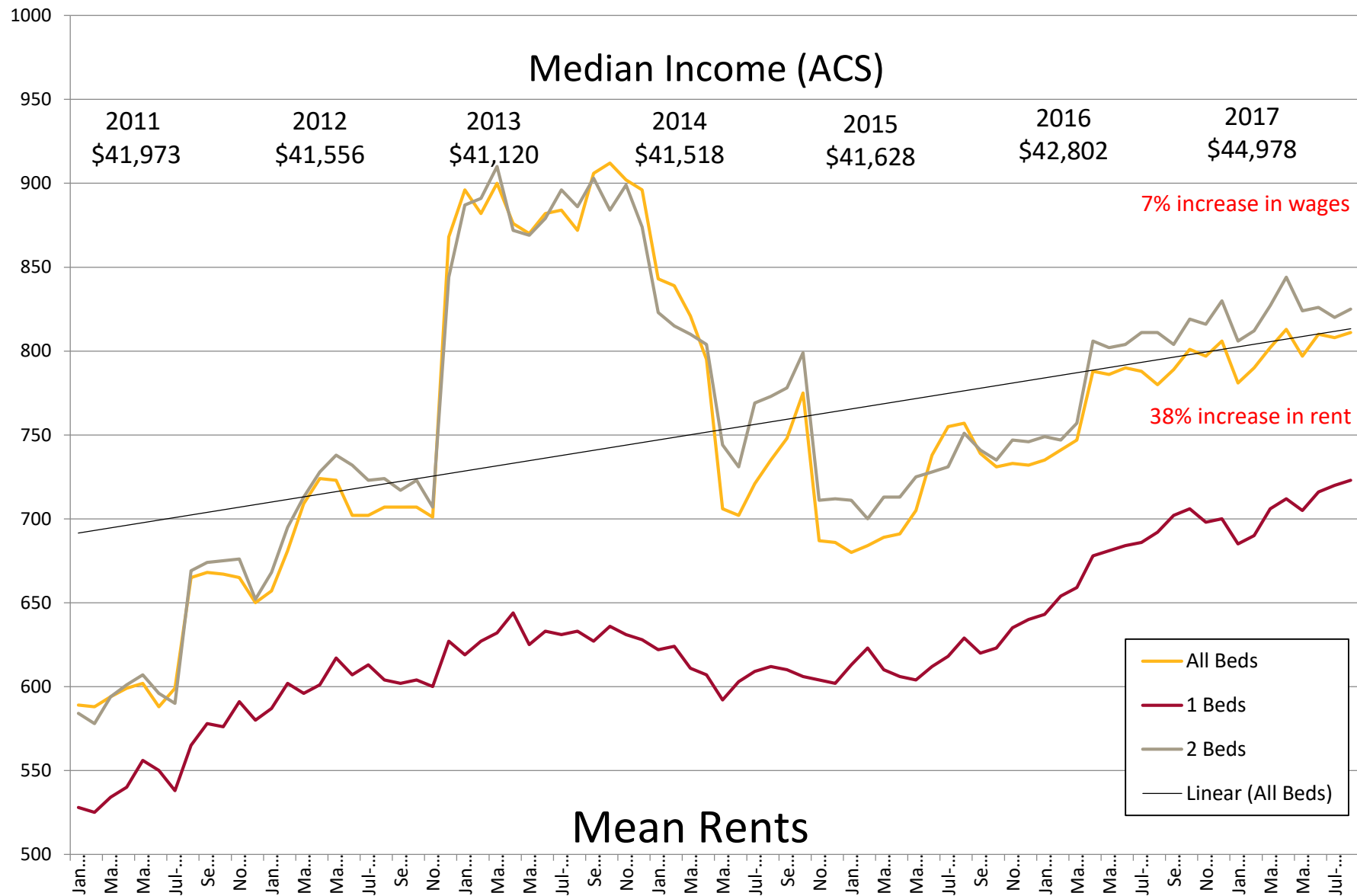
UNC GREENSBORO

*Center for Housing
& Community Studies*

Average Monthly Rent 2011-2016

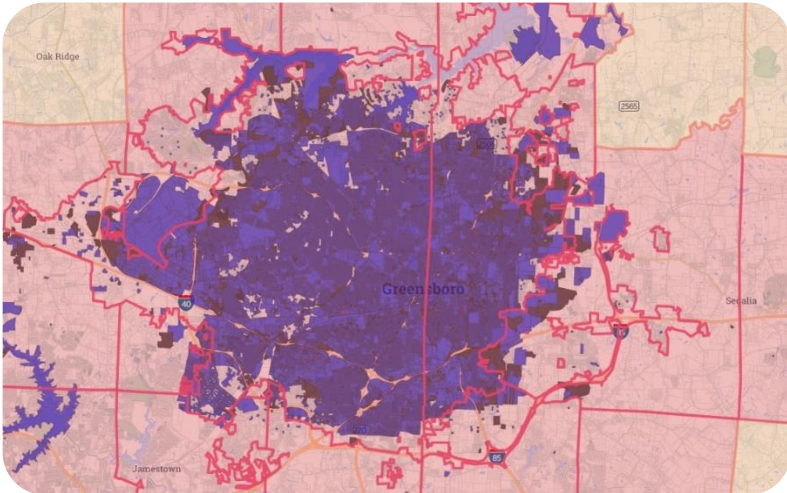
Average Vacancy Rate





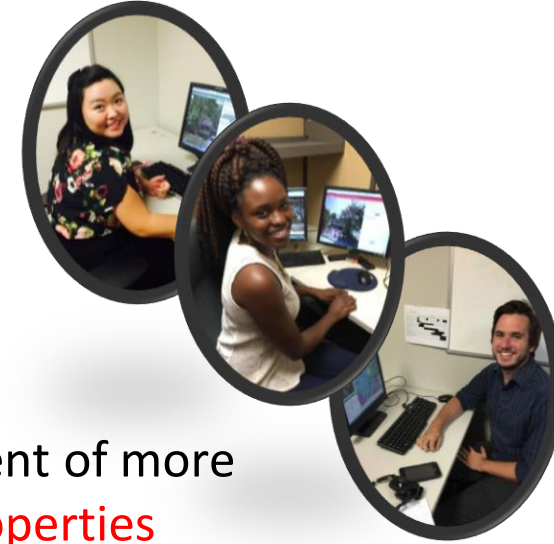
Greensboro Housing Census

Summer-Fall 2016, the UNCG Center for Housing and Community Studies (CHCS) conducted a 'census' of the housing stock, assessing the **structural quality of housing** in Greensboro.



Visual assessment of more than **77,000 properties** completed.

parcel-by-parcel assessment of all lots and buildings



Find a place

701 TRYON AVE

Basic

Talk

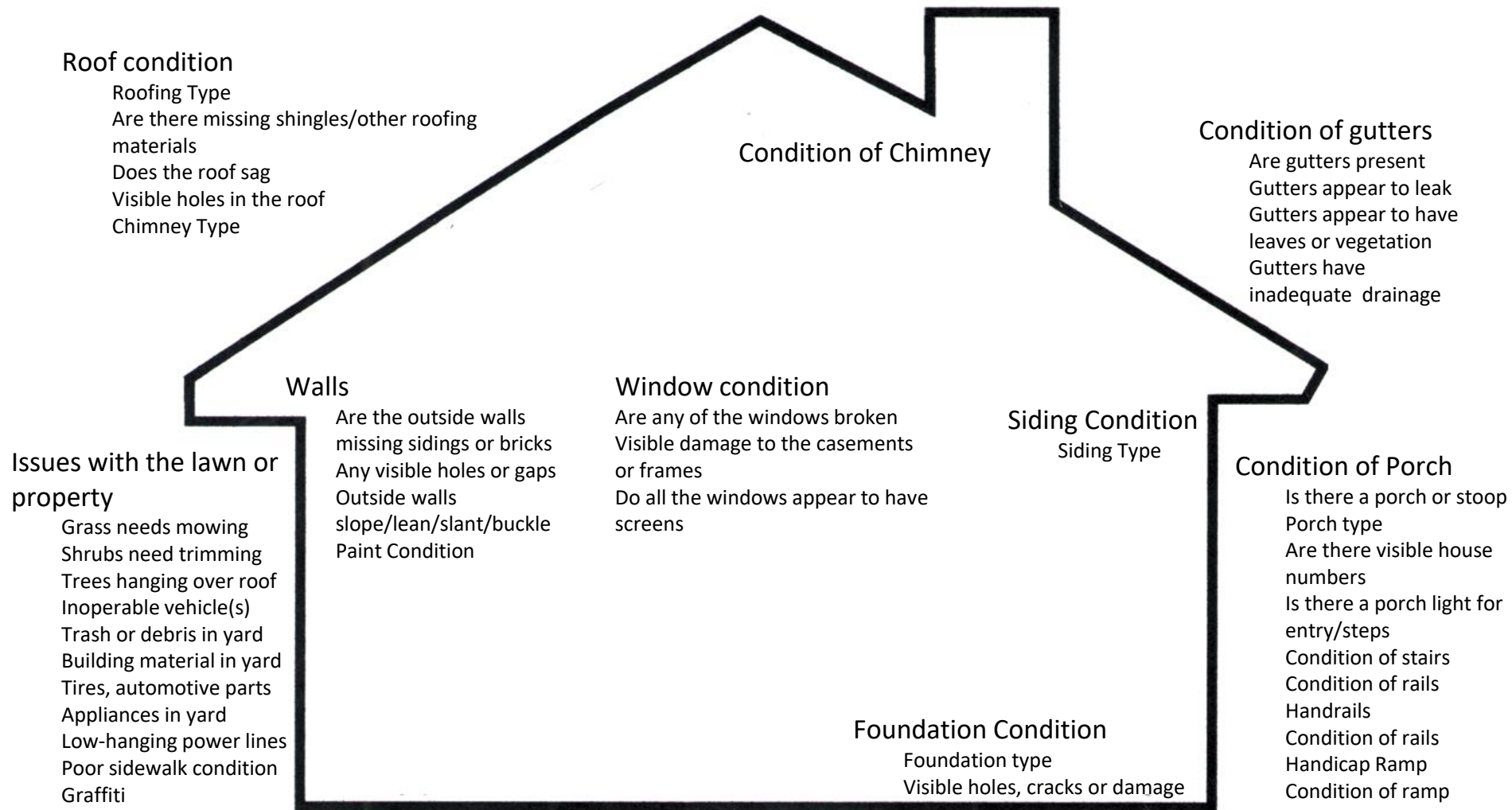


Survey this property

Address	701 TRYON AVE
Owner	MCDONALD, EFFIE SPEC
Parcel ID	7709096874
City	HIGH POINT
Neighborhood	VAIL @ HILLTOP
Land Class	RESIDENTIAL
Acreage	0.15
Zoning	RM-8
Total Land Value	8500
owner_mail_1	1312 WENDELL AVE
Owner City	HIGH POINT
Owner State	NC

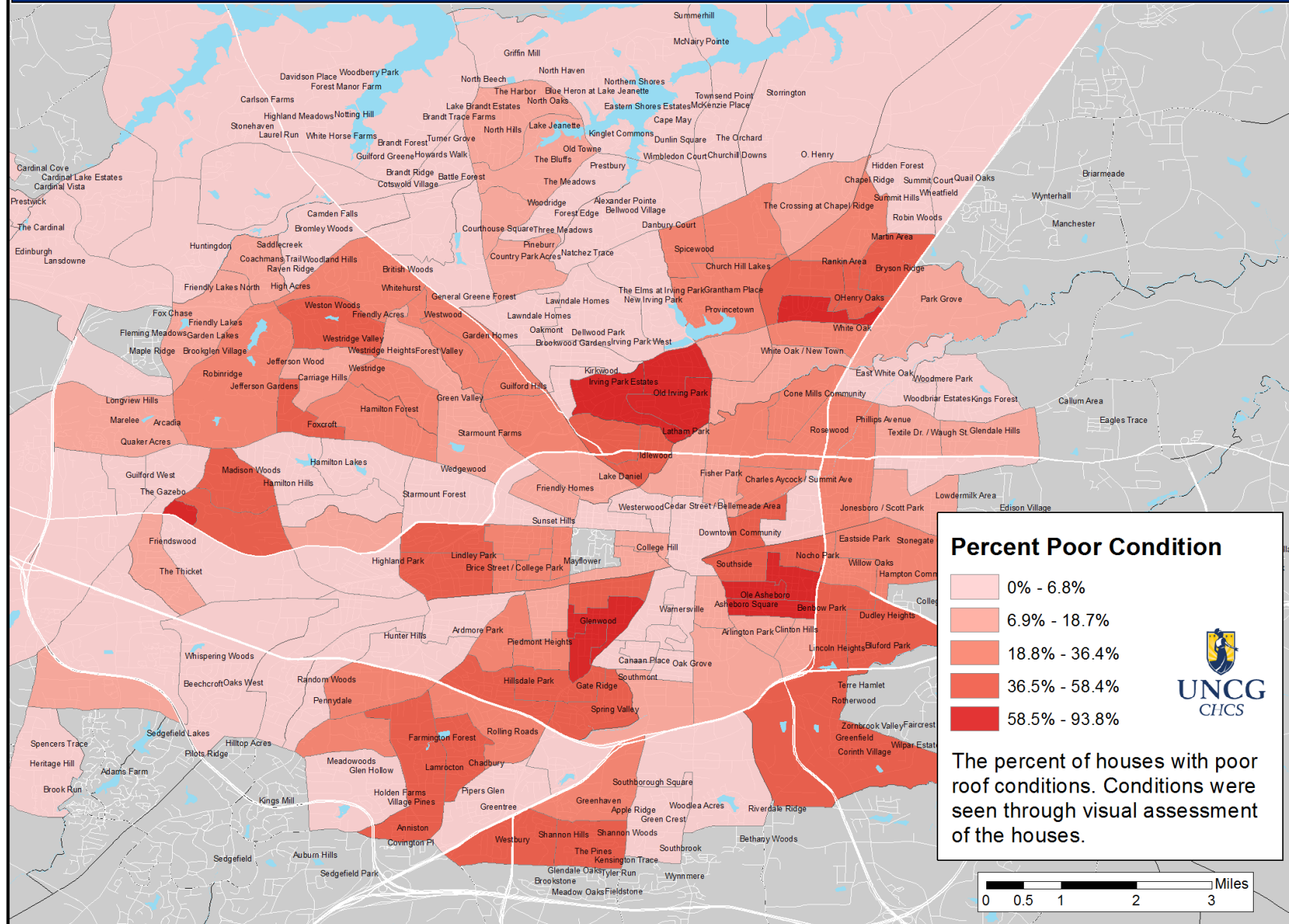


Remote External Assessments

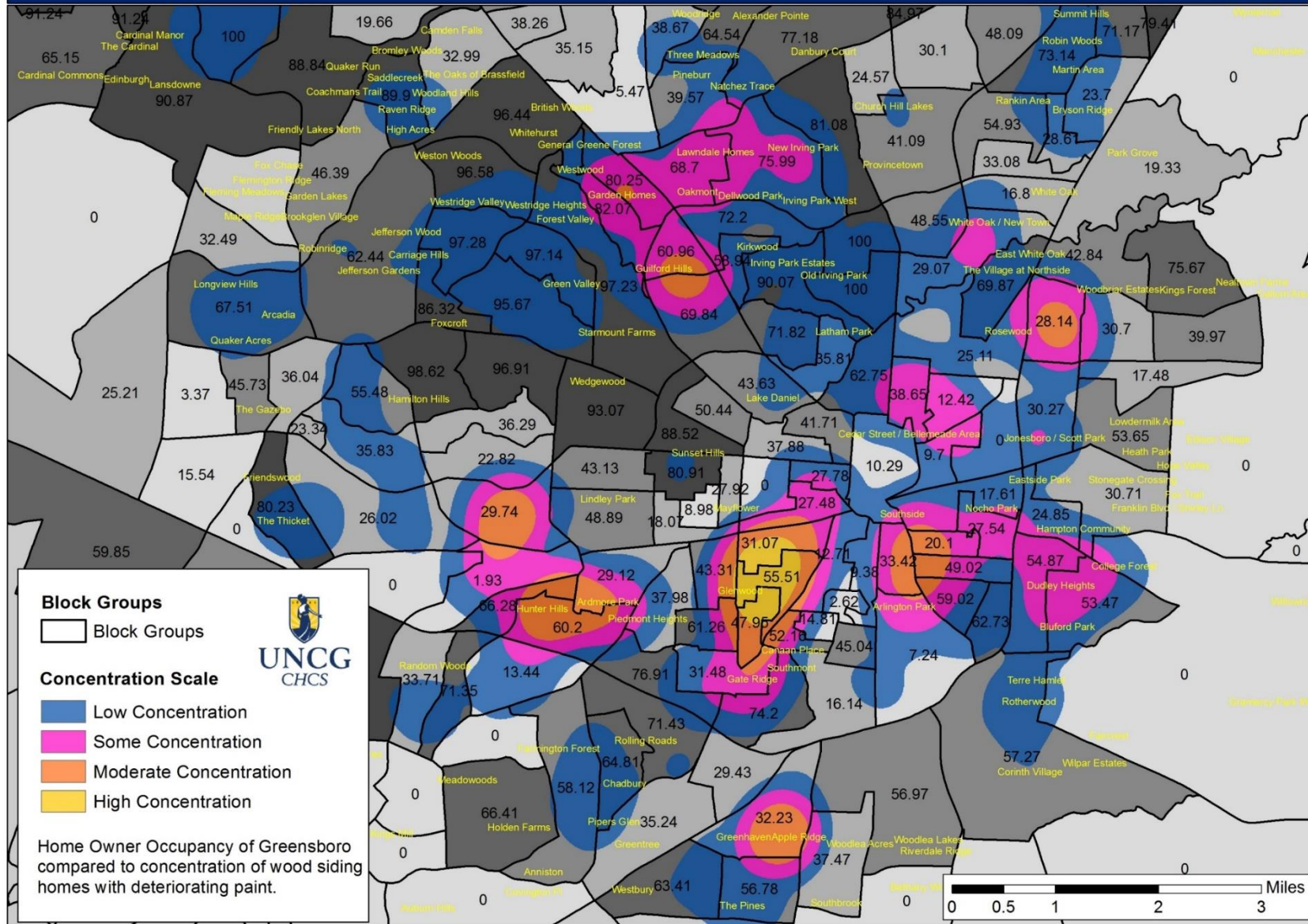




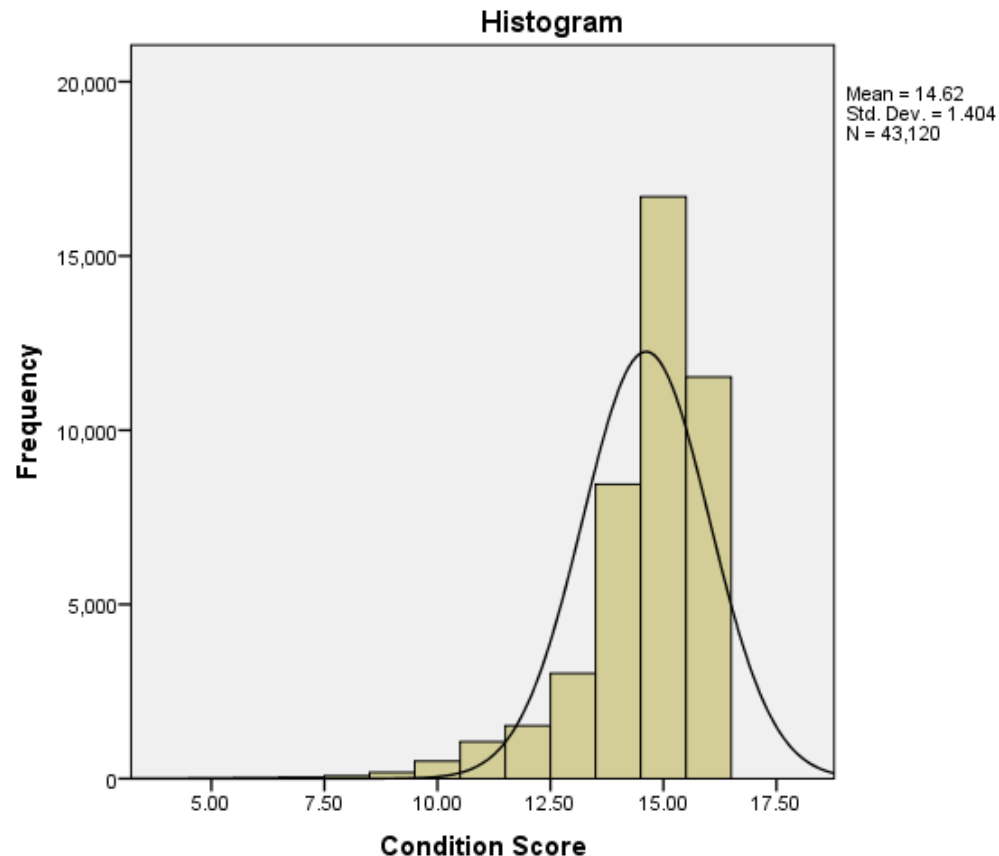
Percent of Houses with Poor Roof Conditions



Owner Occupancy of Wood Homes with Deteriorating Paint



'Below Average' Housing

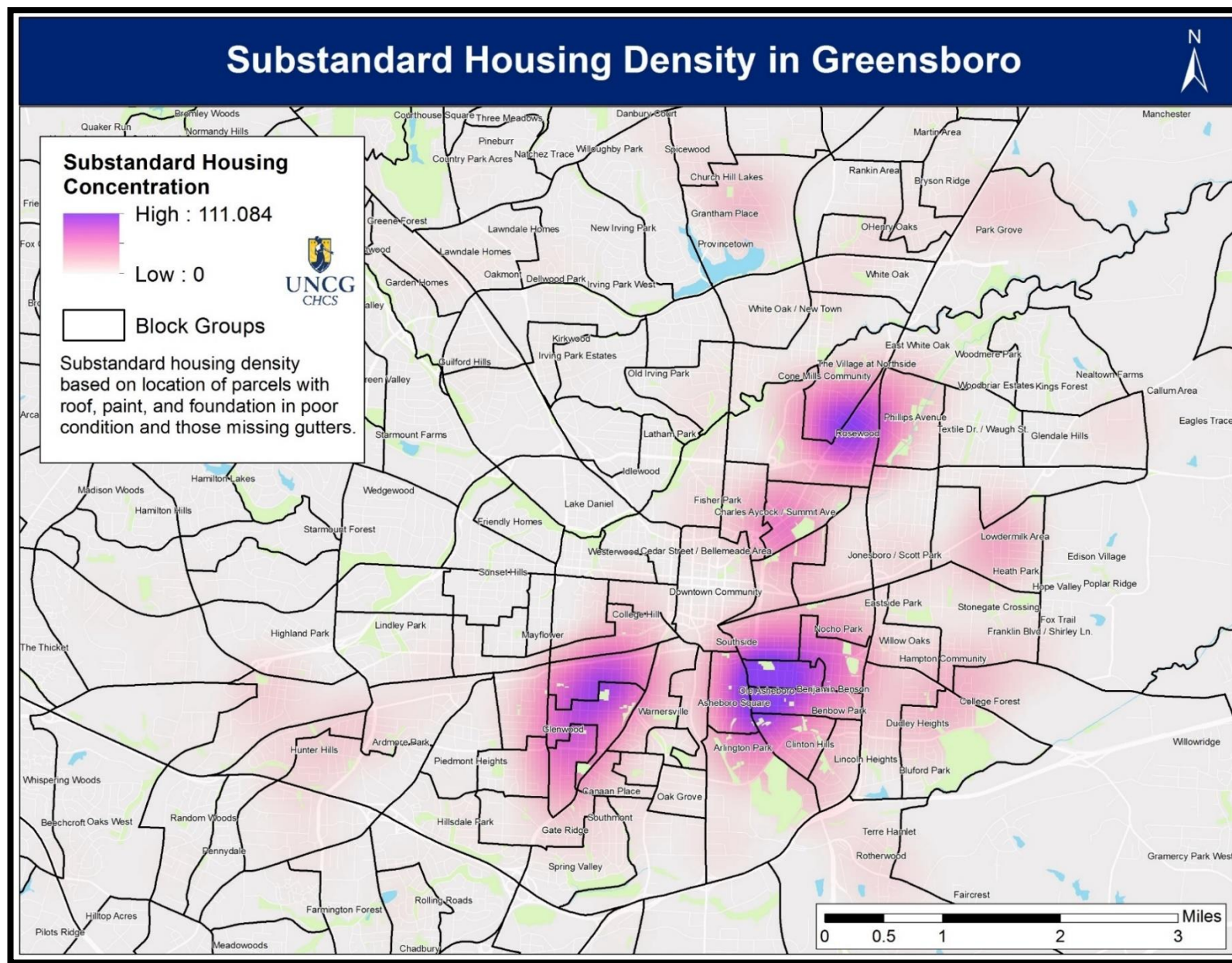


Condition=condition of window + condition of Siding + overall condition of foundation + Condition of Roof + paint condition - Is the structure fire damaged + are gutters present.

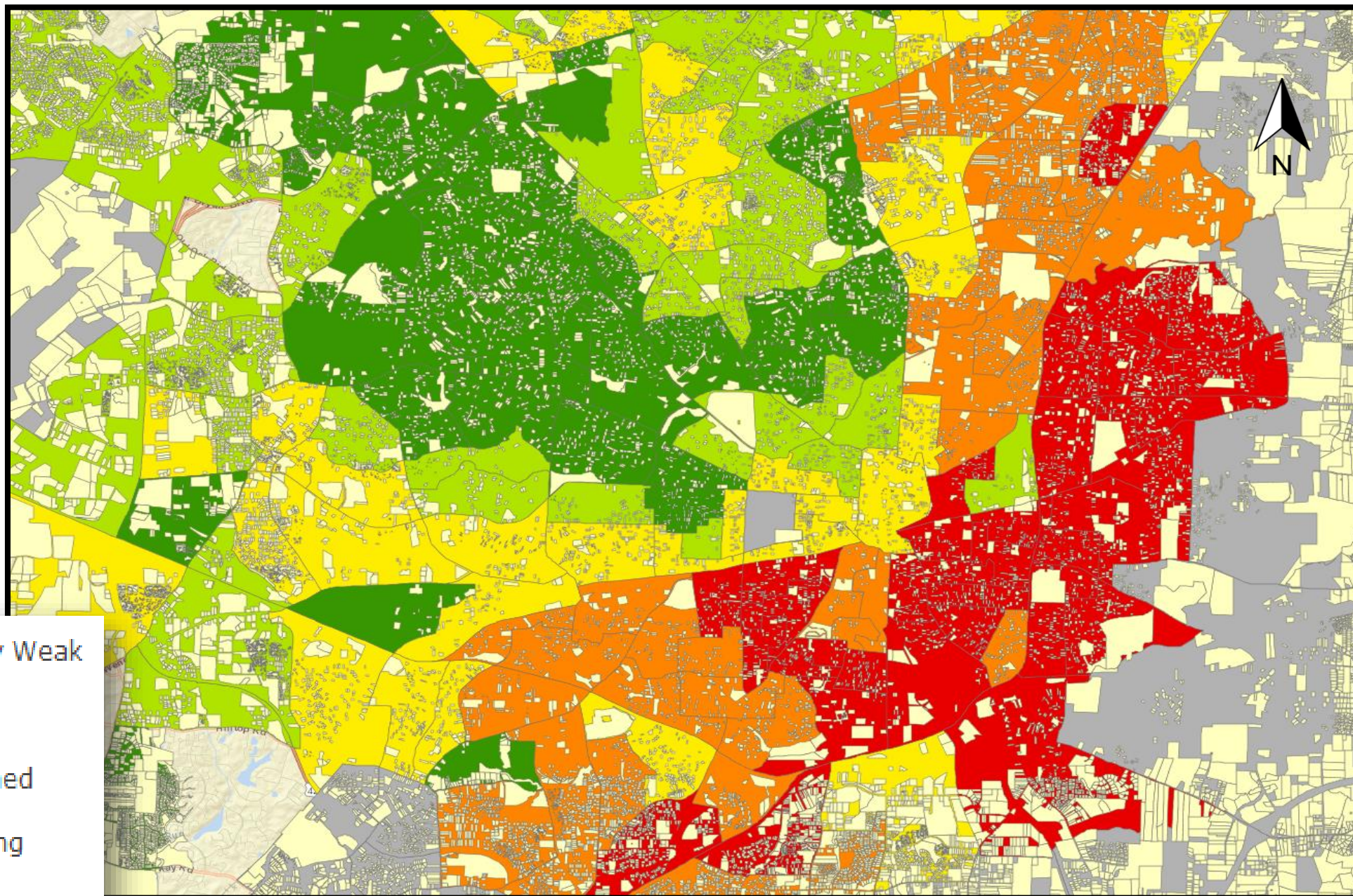
This scale is 18 points with higher being better condition. The 'average' house in Greensboro for which we collected all of this data, is 16.39. The lowest score had poor windows, poor siding, poor foundation, poor roof, poor paint, had no gutters, and may be fire damaged.

Properties with a score of 14 are a standard deviation below the mean , **13% of properties are a standard deviation below average**. Properties with a score of 12 were two and a half standard deviations below the mean, **4.2% of properties were in this category**.

Substandard housing density is higher in low income areas of Greensboro and High Point.



From presentation by Dr. Steven Sills, Director of the UNCG Center for Housing and Community Studies.



[illegible]

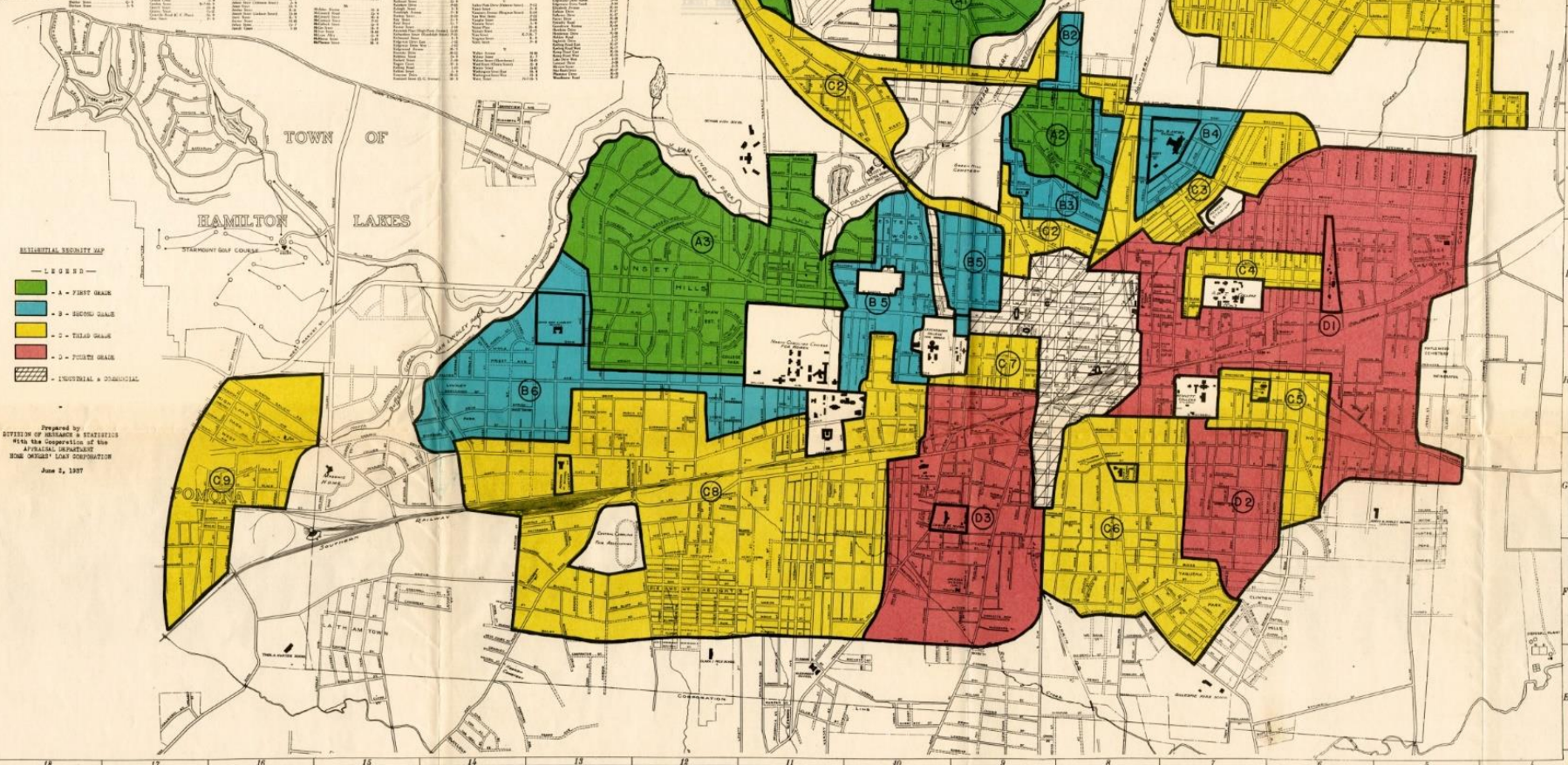
OLD STREET NAMES APPEAR IN PARENTHESES

April 1936

OLD STREET NAMES APPEAR IN PARENTHESES

Scale 1 inch equals 1000 feet

April 1936



RELIGIOUS SECURITY WAR

—LEGEND—

- A - FIRST GR

 Blue square icon

 - INDUSTRIAL &

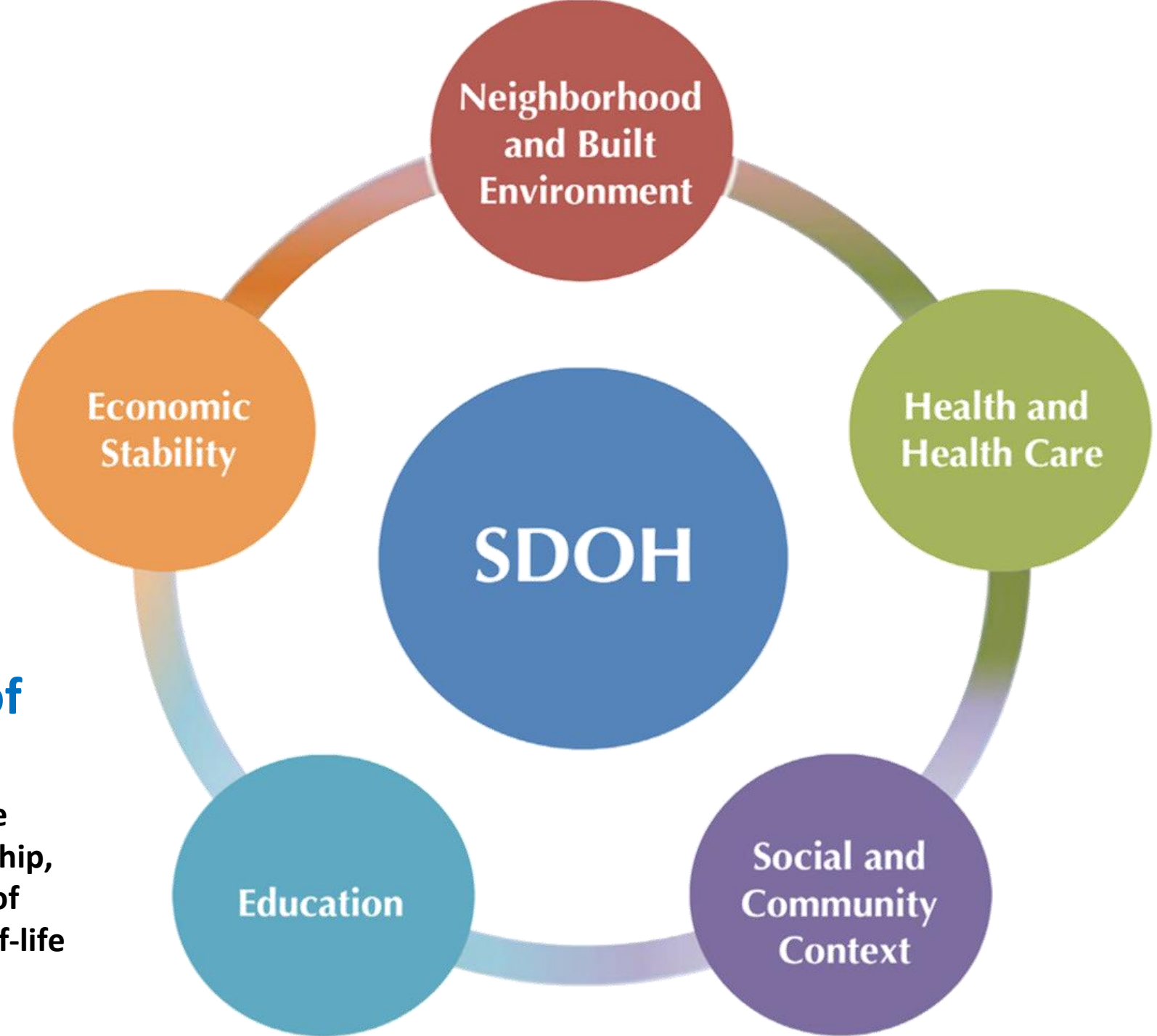
DIVISION OF RESEARCH & STATISTICS
With the Cooperation of the

HOME OWNERS' LOAN CORPORATION

JUN 4, 1957

18

Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.



5
Steps

Building an

Asthma-Safe City

1 Identify Health Impact Neighborhoods

2 Health System Integration:
Substandard Housing & Asthma

3 Targeted Minor Repair &
Housing Rehabilitation Programs

4 Leverage Public &
Private Redevelopment Funds

5 Information Exchange Network

InvestHealth
Greensboro, NC





Over 6,000 children with asthma to live in places that make them sick in Greensboro.

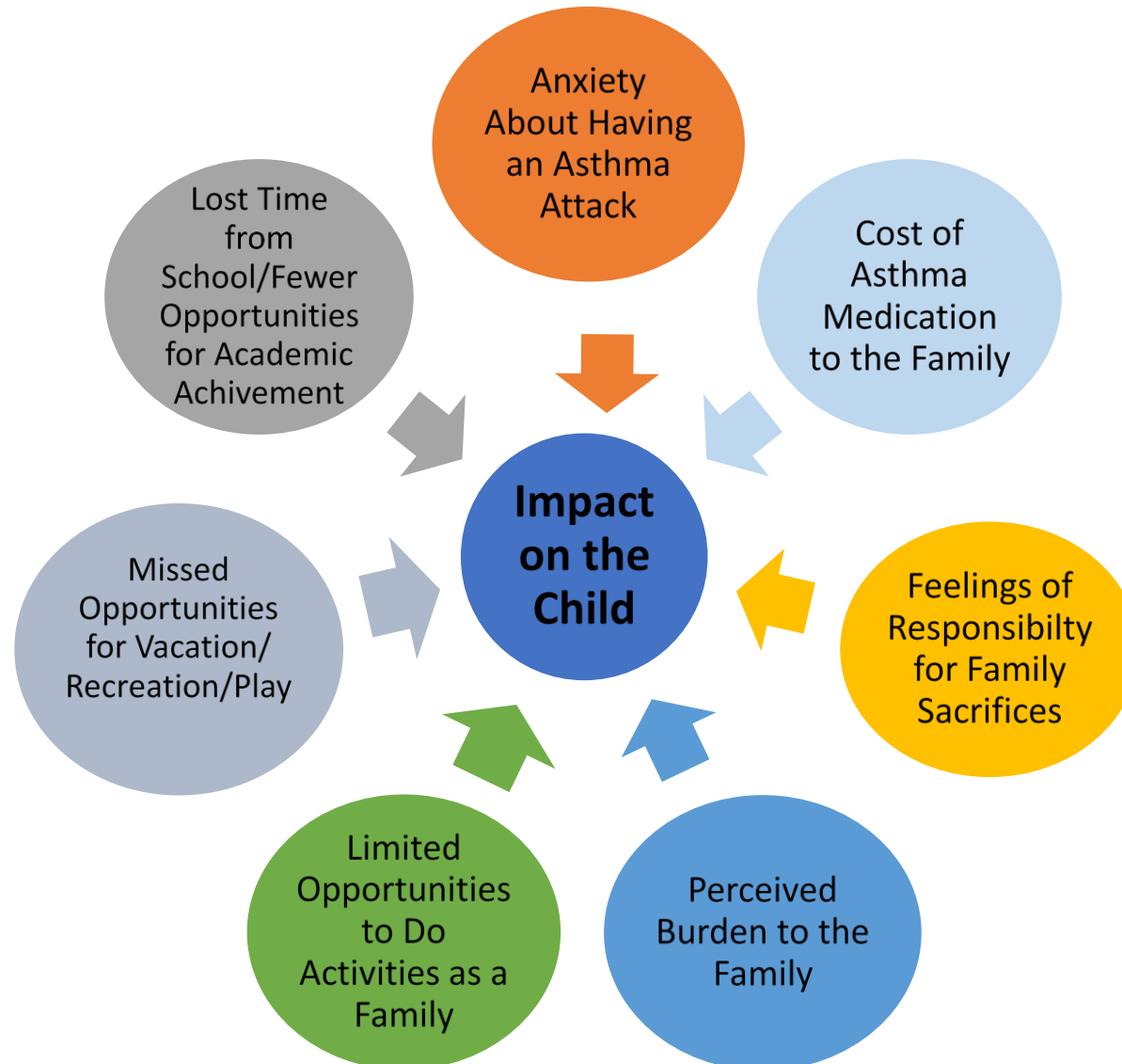
The Asthma and Allergy Foundation of America (2015) shows that Greensboro's asthma rate is influenced by higher than average poverty and uninsured rates.

Disparities in asthma prevalence are evident by race, ethnicity, and geo-spatial segregation, largely among residents of rental units.

The connection between unhealthy housing and the incidence of pediatric asthma is both a health and quality of living issue.

Housing that makes children sick can often be repaired or improved with modest investments in structural fixes and removal of sources of allergens.

Impact of Childhood Asthma on the Child



- Asthma Prevalence rates are high in Guilford County (15% compared with 8% nationally)
- We looked at primary *and* secondary diagnoses and ED *and* hospital visits for just one quarter of 2016 - over 6200 cases in all
- The goal of our project was to see *where* asthma was concentrated and not the prevalence.

PrimaryDX

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Asthma	1383	22.3	75.6	75.6
	COPD	20	.3	1.1	76.7
	bronchitis	5	.1	.3	77.0
	pneumonia	77	1.2	4.2	81.2
	upper respiratory infection	281	4.5	15.4	96.6
	respiratory failure with hypoxia/hypercapnia	8	.1	.4	97.0
	Allergy/Allergic rhinitis	34	.5	1.9	98.9
	sinusitis	17	.3	.9	99.8
	Other specified respiratory disorders	4	.1	.2	100.0
	Total	1829	29.5	100.0	
Missing	System	4369	70.5		
Total		6198	100.0		

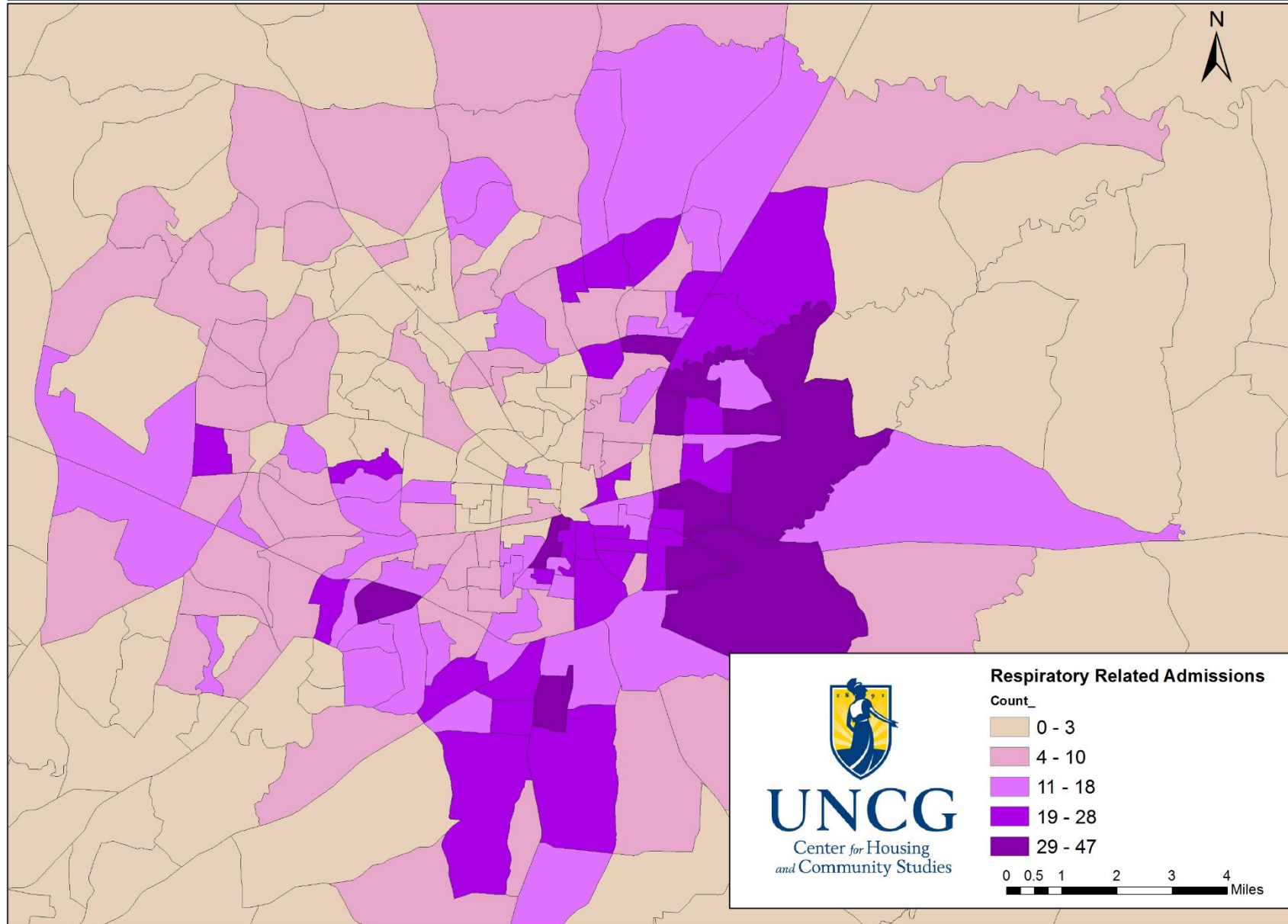
Asthma 93.2%
Other Respiratory Issue 6.8%

SecondaryDX

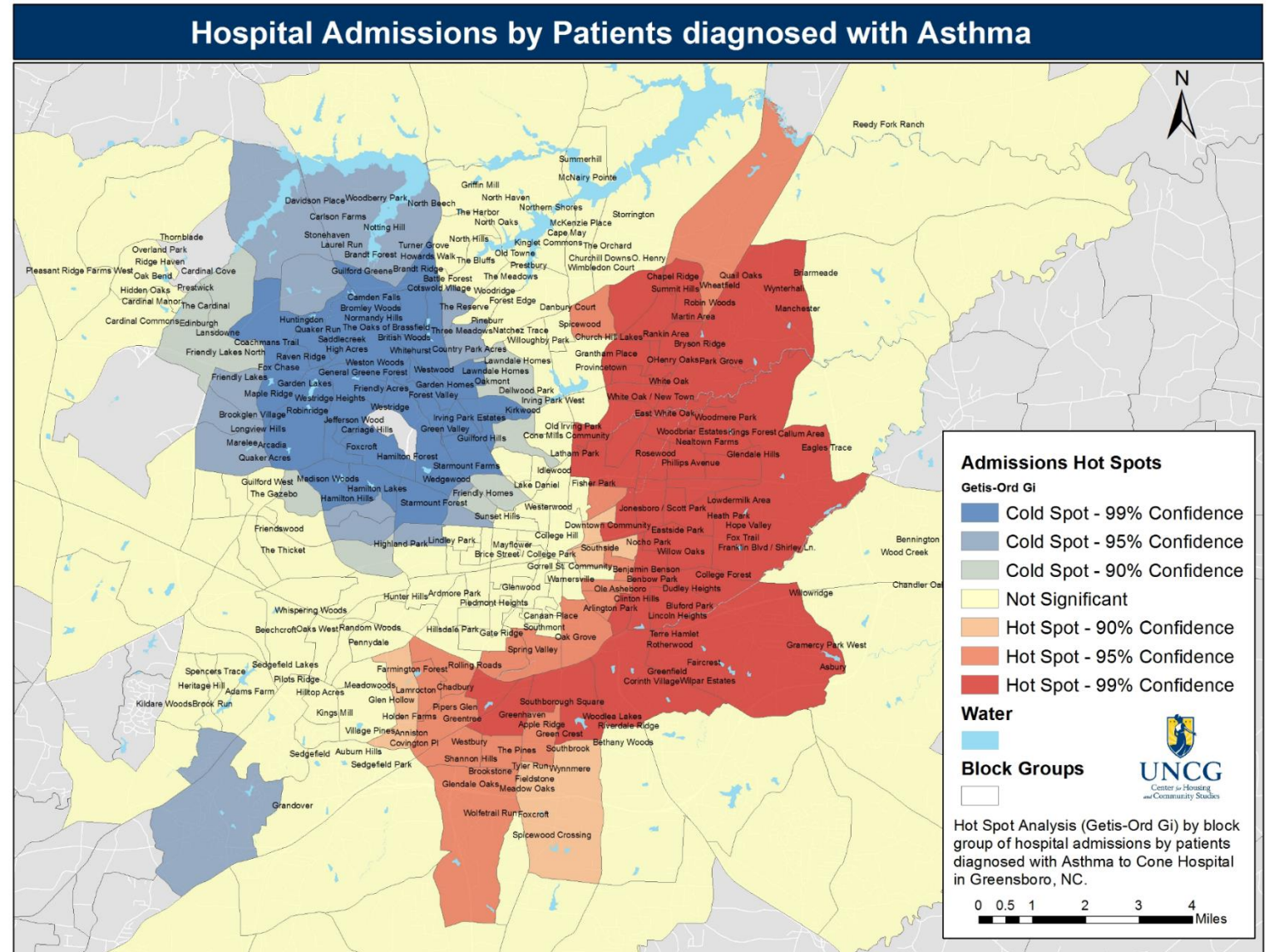
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Asthma	4397	70.9	88.7	88.7
	COPD	408	6.6	8.2	97.0
	bronchitis	1	.0	.0	97.0
	pneumonia	9	.1	.2	97.2
	upper respiratory infection	92	1.5	1.9	99.0
	respiratory failure with hypoxia/hypercapnia	39	.6	.8	99.8
	Allergy/Allergic rhinitis	5	.1	.1	99.9
	Cough	2	.0	.0	100.0
	sinusitis	2	.0	.0	100.0
	Total	4955	79.9	100.0	
Missing	System	1243	20.1		
Total		6198	100.0		

Respiratory Illnesses

Hospital Admissions of Patients Diagnosed with Respiratory Issues

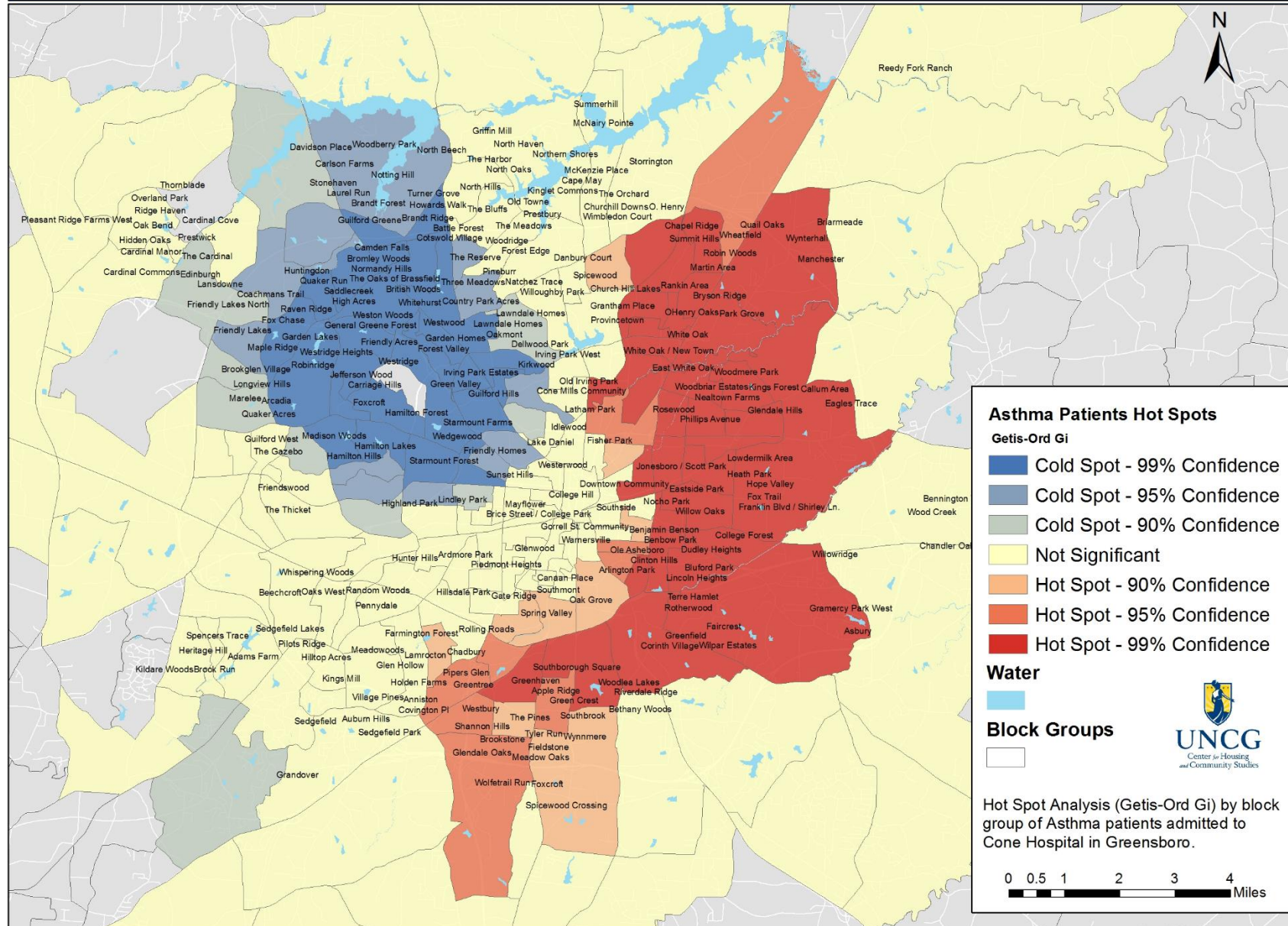


Areas of the County with Substandard housing have higher rates of hospital admissions due to asthma.

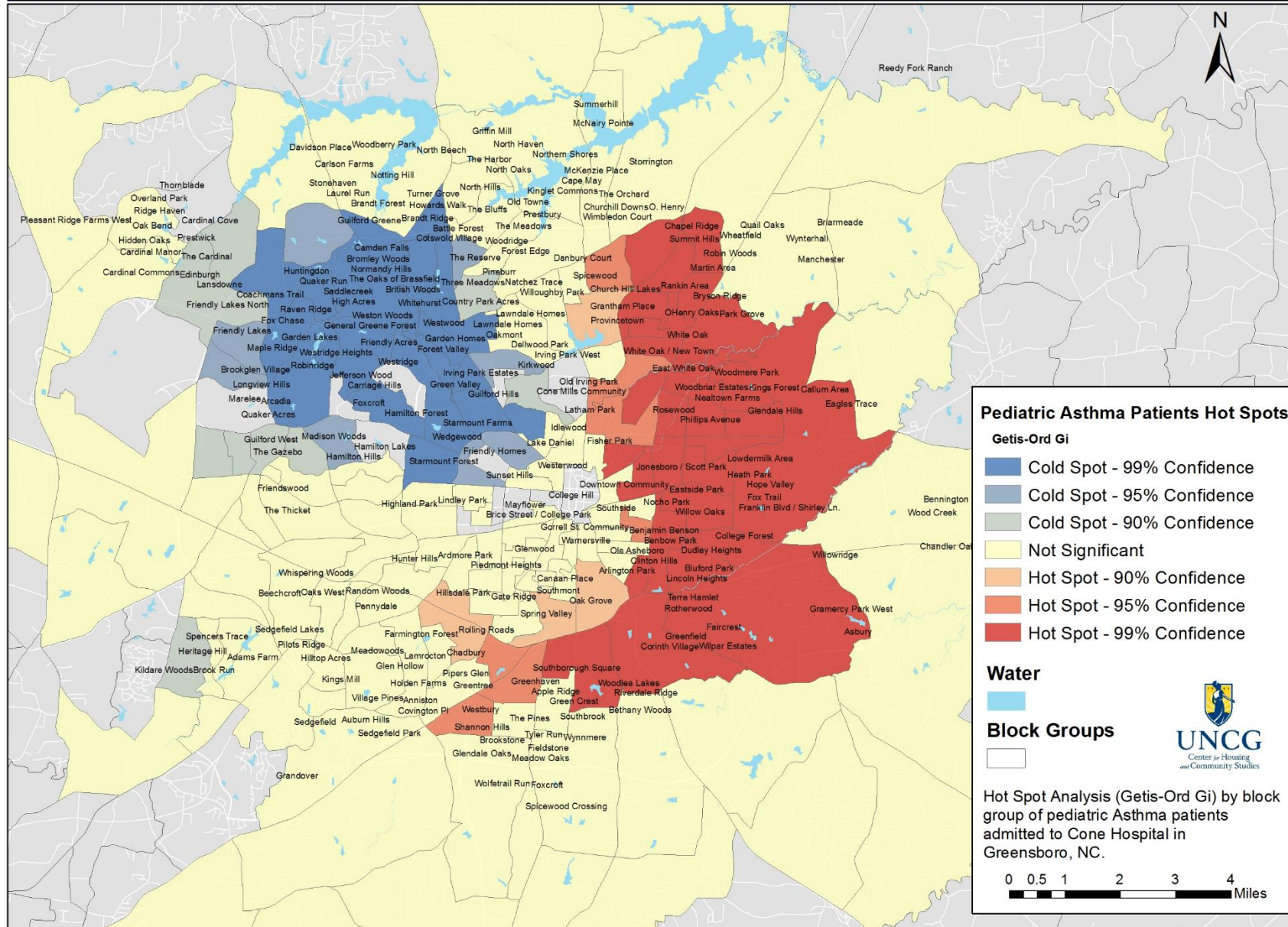


From presentation by Dr. Steven Sills, Director of the UNCG Center for Housing and Community Studies.

Asthma Patients



Pediatric Asthma Patients



		Social Determinants	Housing Conditions	Neighborhood Characteristics	Full Model
		Model 1	Model 2	Model 3	Model 4
Social Determinants	Constant	-	***	-	-
	Non-White	***		***	***
	Moved Last Year	-		-	-
	Completed HS	****		***	***
	% Families in Poverty	**		**	**
	% Homes Owner Occupied			+	-
	Mean Tax Value			-	-
	% Vacant Homes		-	-	-
	% Homes with Bad Roof		-		-
	% Homes with No Gutter		***		*
Neighborhood	% Homes with Bad Paint		-		+
	% Homes with Bad Found		-		-
	R ²	.614	.154	.622	.638
	df	4	5	7	11
	F	=.0001	=.0001	=.0001	=.0001
Housing Conditions					

A CLOSER LOOK AT

Evictions



Greensboro has the highest evictions rate of cities in North Carolina

HERE IS A SHORT LIST...



16,600 Filings

In 2016, landlords filed over 16,600 summary ejectments to evict tenants for nonpayment.



9,600 Annually

9,600 were summary ejectments granted in whole or in part

26

26 Evictions a Day

26 households face being evicted on any given day in Guilford County



Health & Mental Health

Eviction, or even the threat of eviction, has been shown to affect mental and physical health.



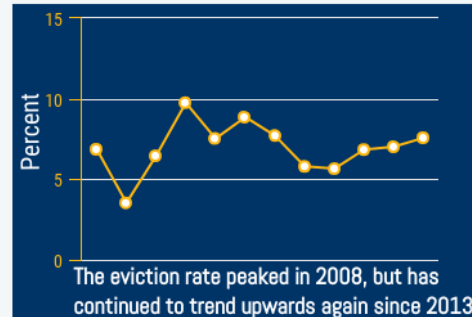
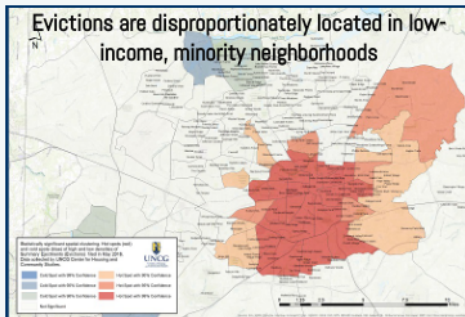
Impact on Children

School performance tends to decrease when students are in unstable housing situations.

7.6%

Eviction Rate

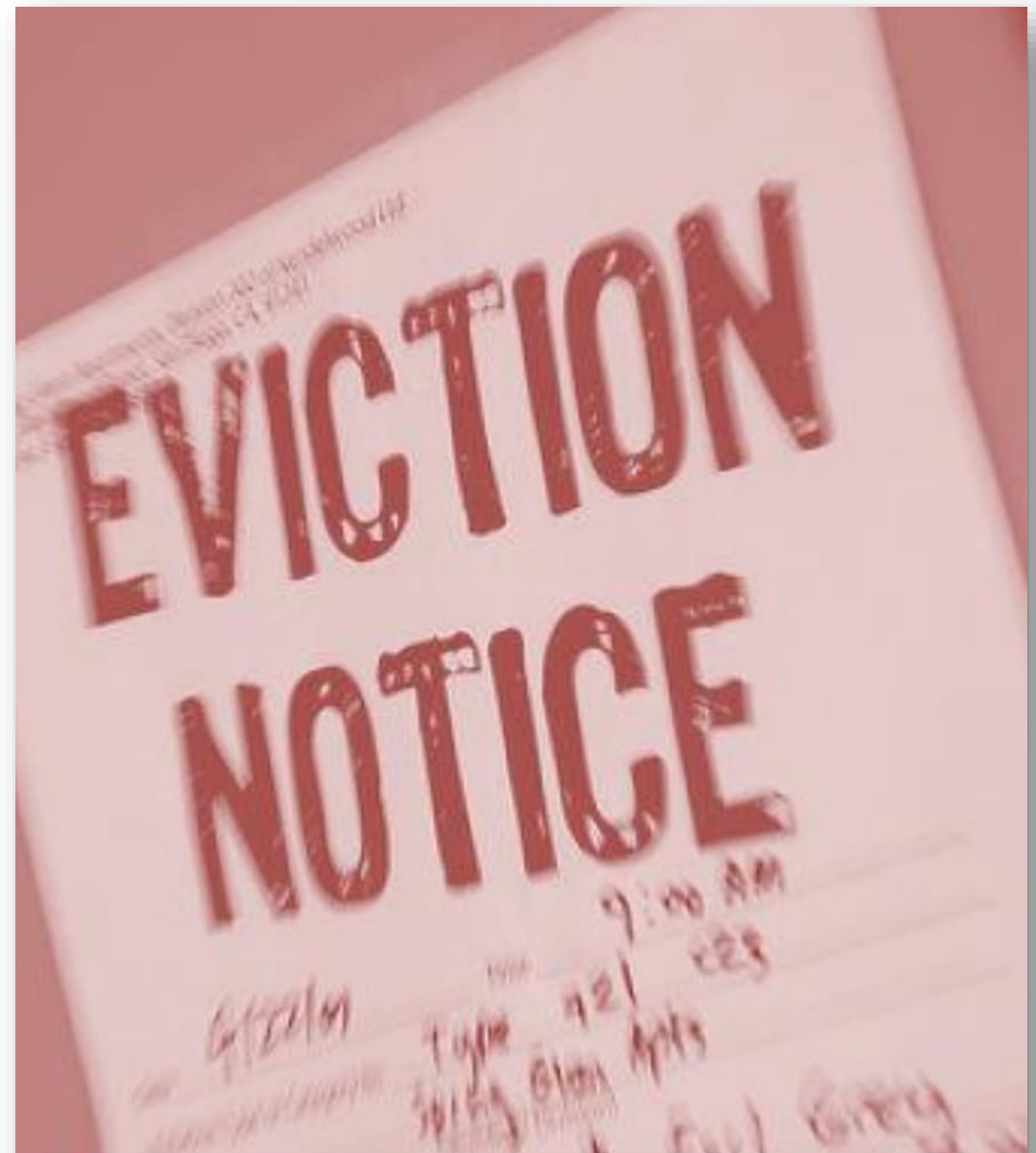
The [Eviction Lab](#) shows the eviction rate in Guilford County at 7.57 per 100 renter households.



More than half of people interviewed experienced periods of homelessness resulting from their evictions



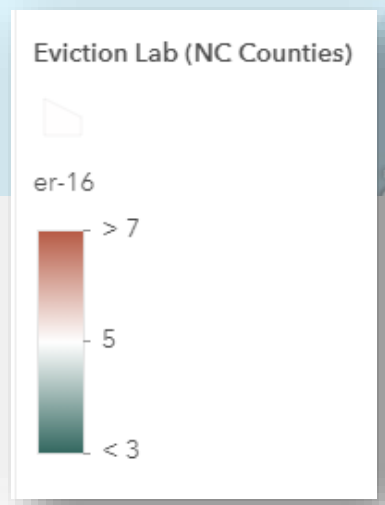
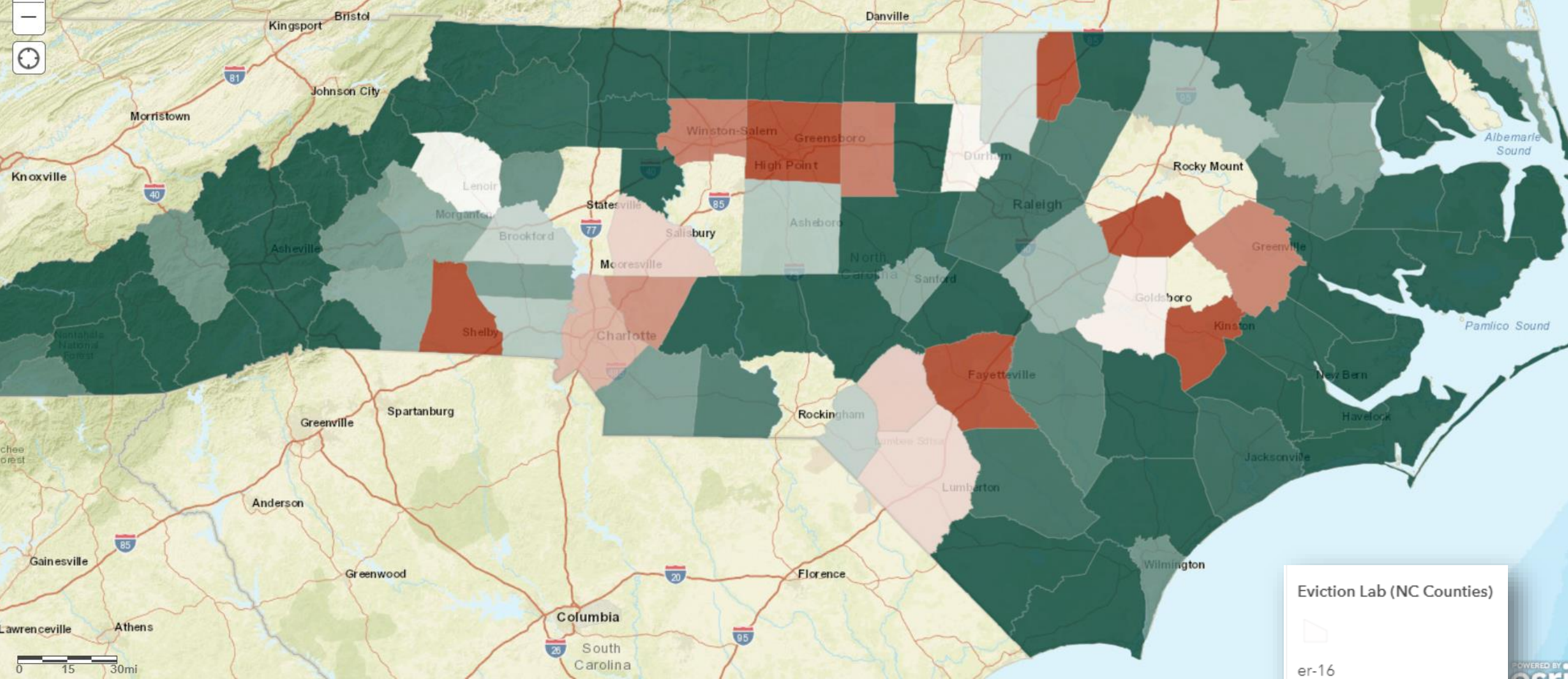
“I lived in a tent in the woods with my dogs for about two months before a woman gave me some money to get a hotel for a while. When the money ran out, I was back and forth in between the woods and living in a hotel whenever I had the money.”

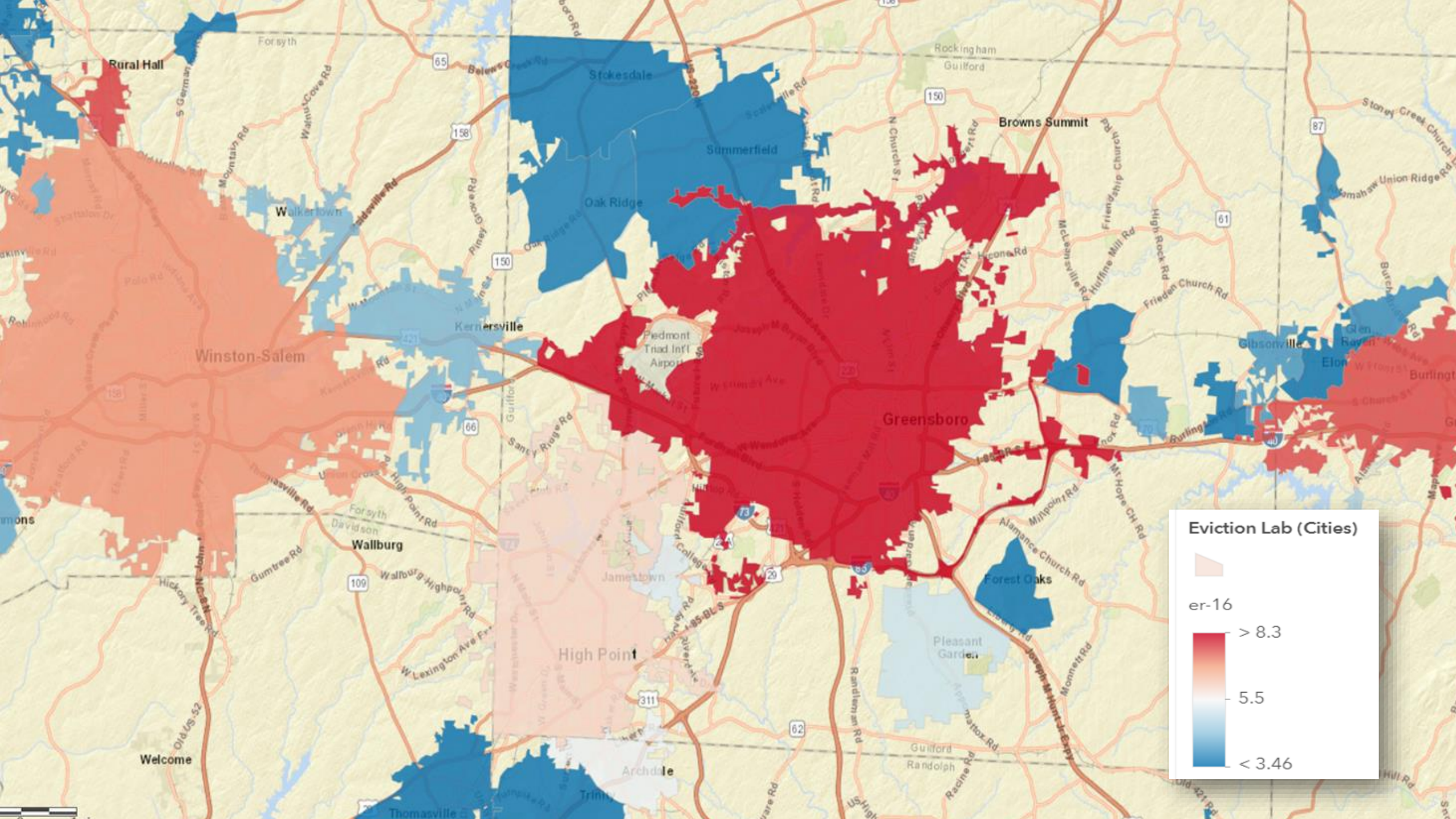


Greensboro's Eviction Crisis

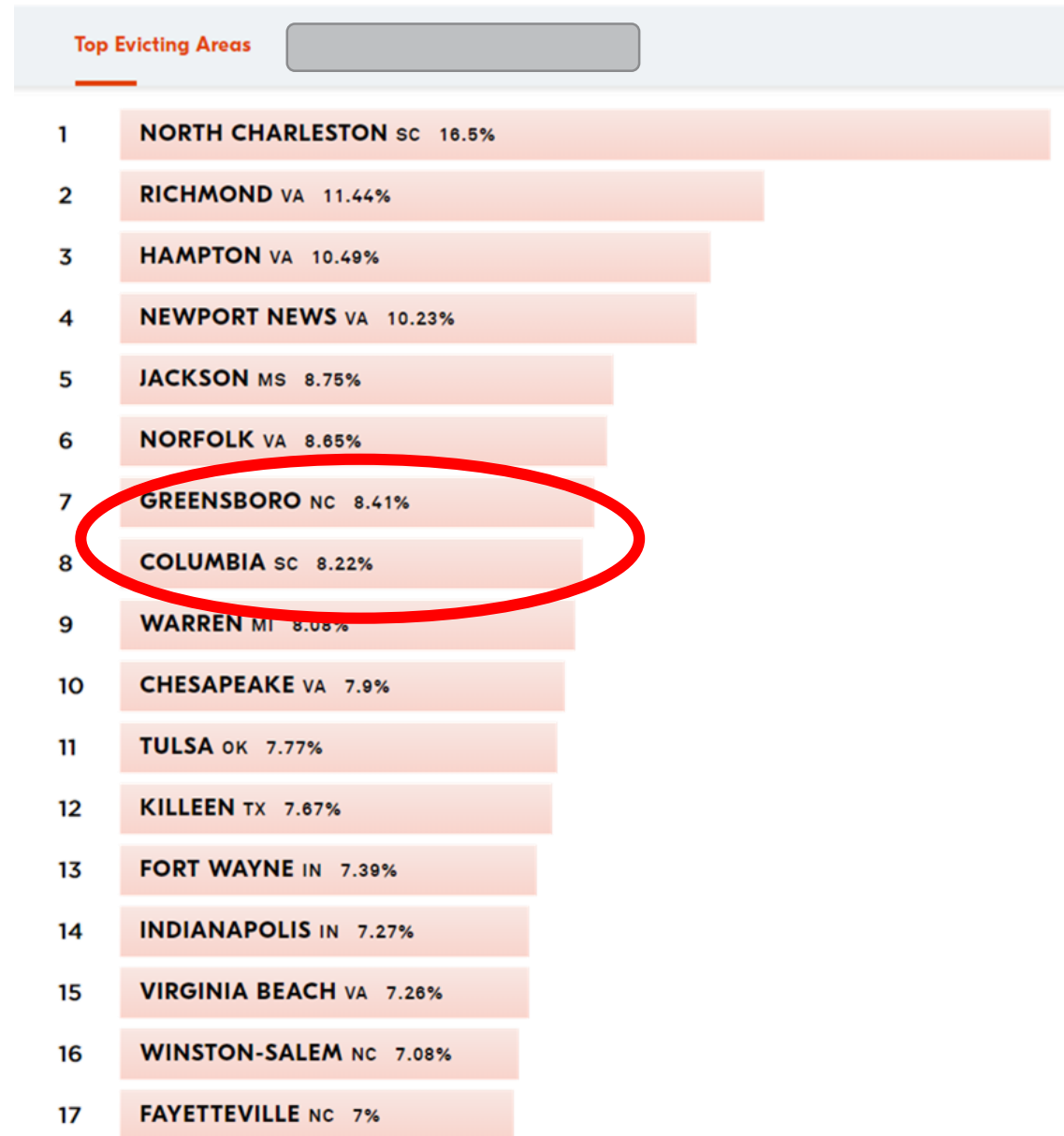
Qualitative Interviews and Observations

Part II of a Series of Reports on Eviction Issues in Greensboro NC
UNCG CENTER FOR HOUSING AND COMMUNITY STUDIES












Greensboro ranks 7th in the nation in eviction. There were 4,948 evictions in Greensboro in 2016, an average of 13.56 households evicted every day.



Source: Eviction Lab; from presentation by Dr. Stephen Sills, Director, UNC Center for Housing and Community Studies.

 Details |  Edit |  Basemap |

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 About  Content  Legend






Legend

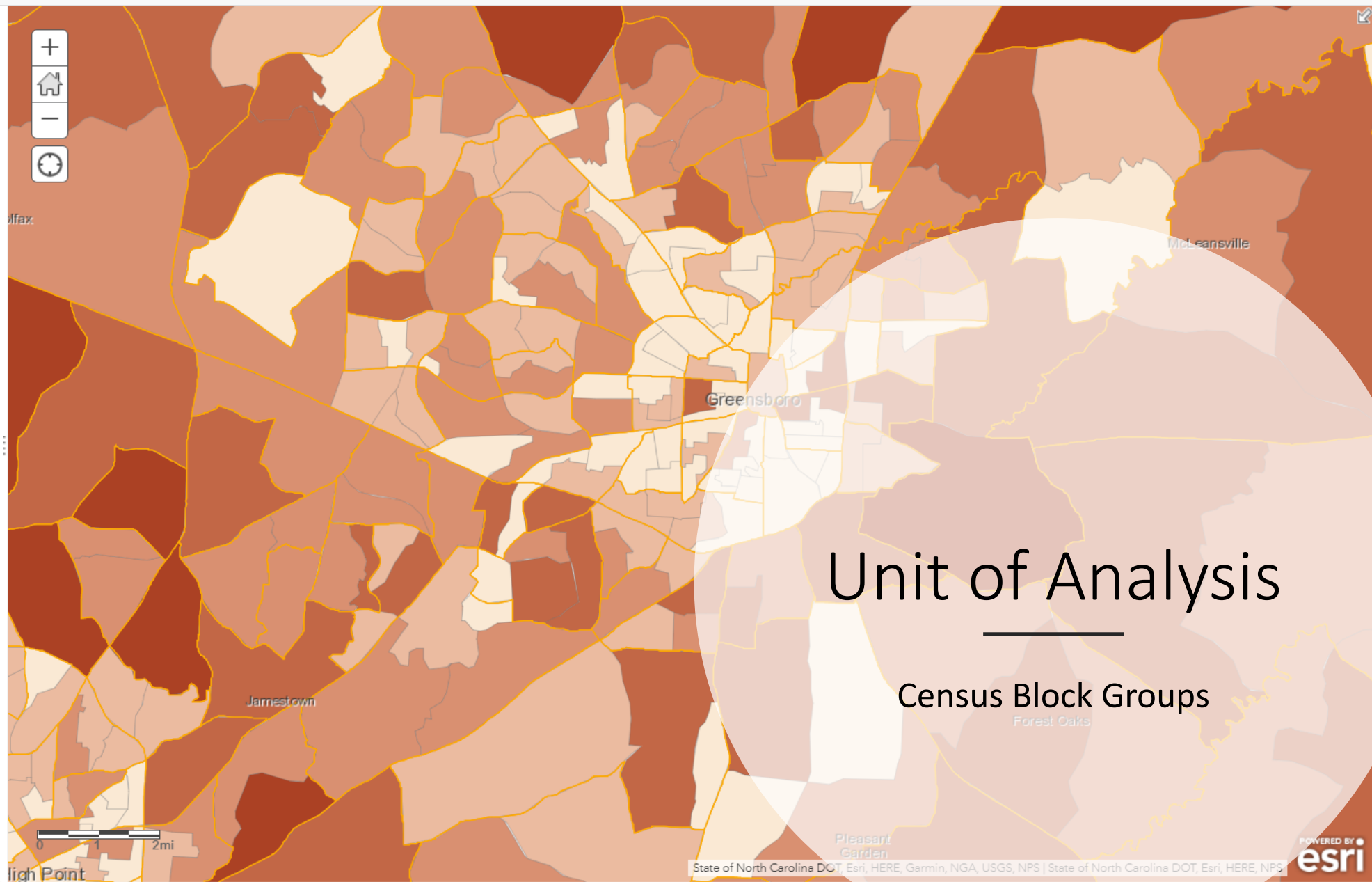
NC Tract Boundaries (Census 2010)



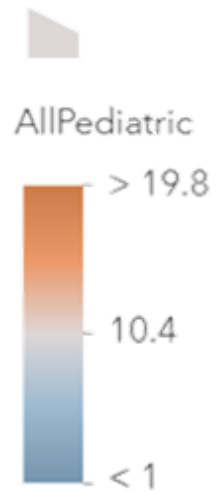
2010 Census Block Groups - 2010 Census - Block Group

TOTAL_POP

-  3612 - 8745
-  2332 - 3611
-  1619 - 2331
-  1050 - 1618
-  0 - 1049

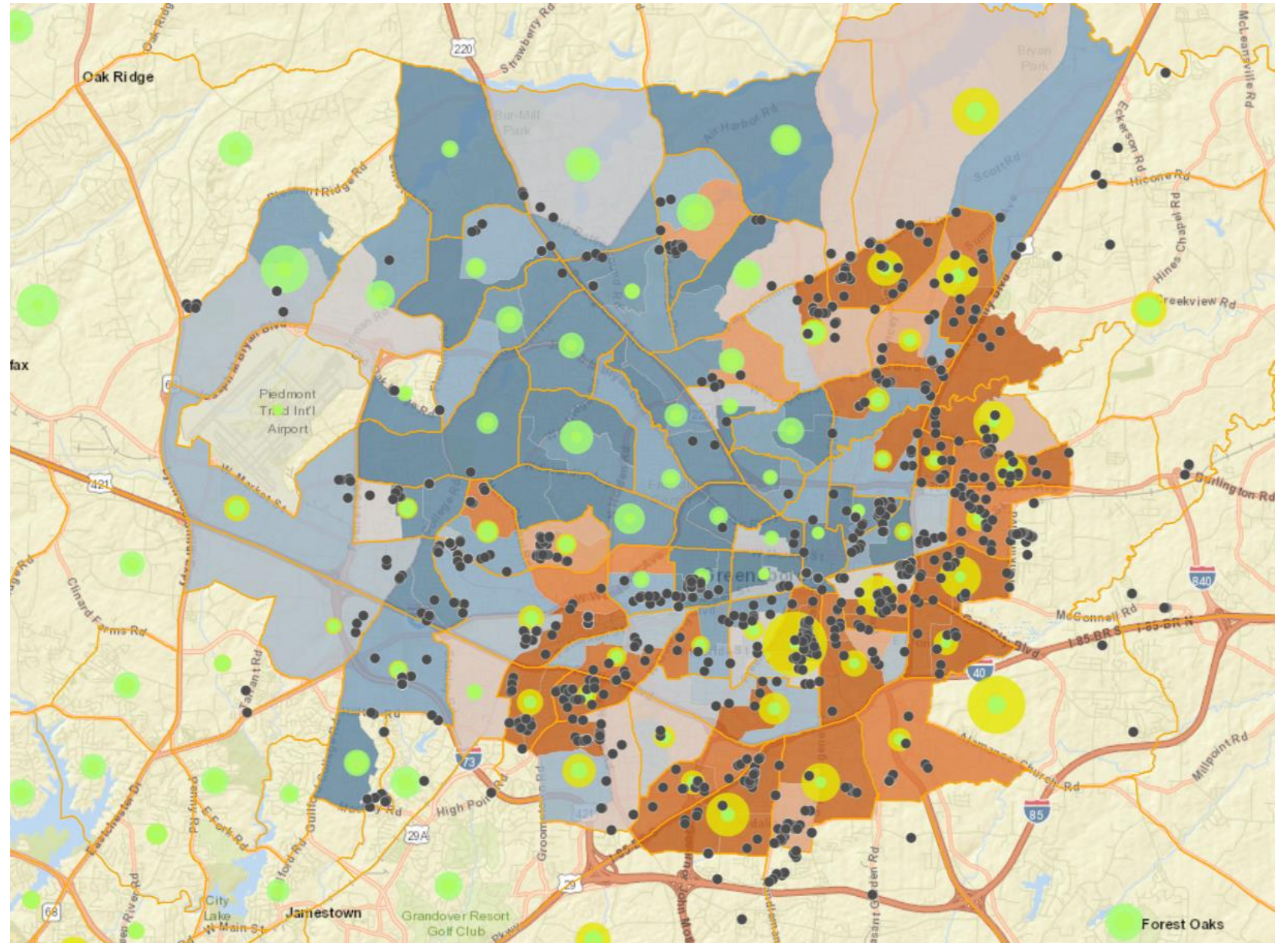


Pediatric Visits to Hospital (Q4 2016)

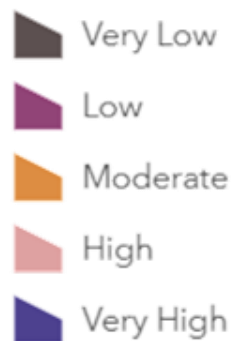


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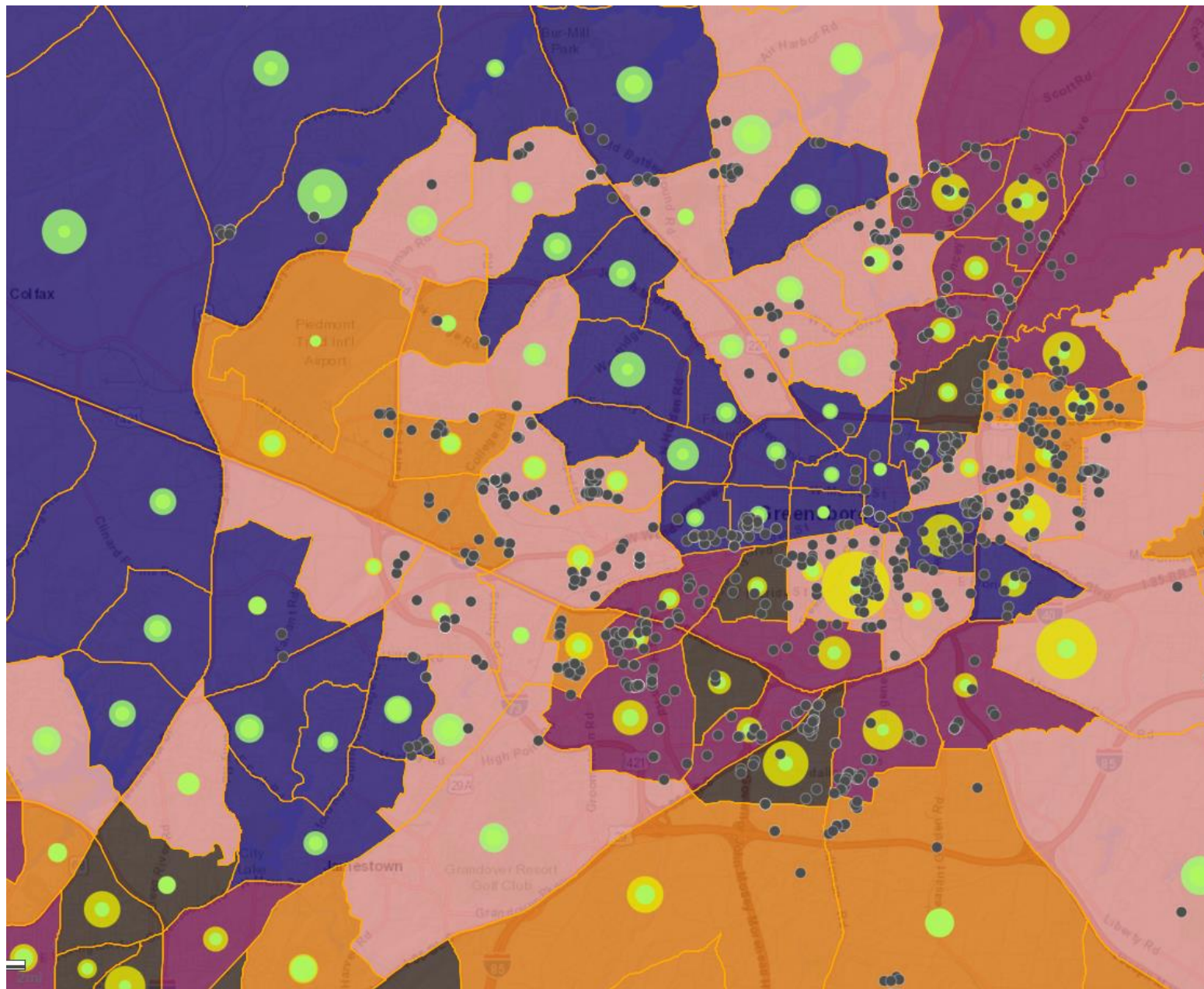


Greensboro_NC - Educational Opportunity
Index Categories - copy

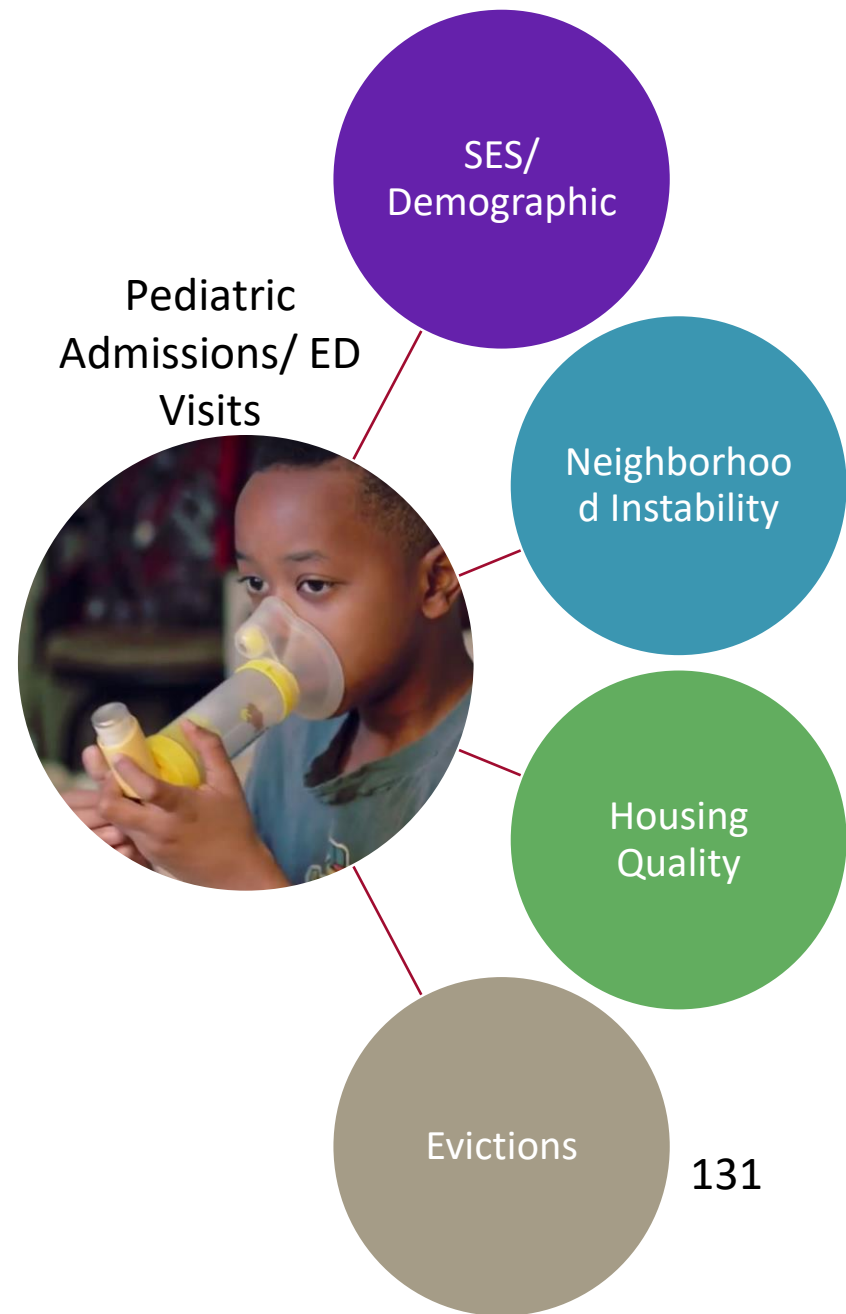
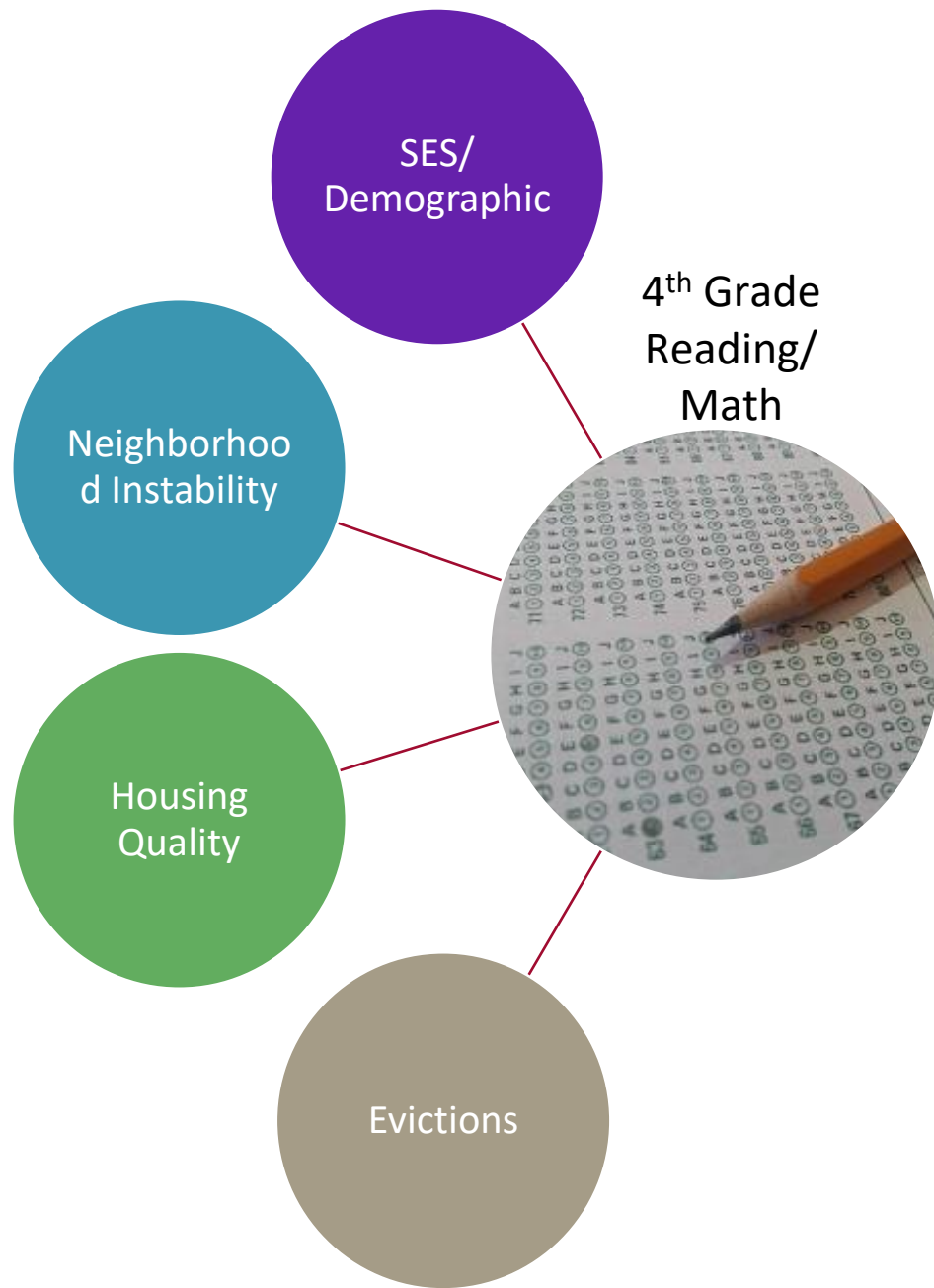


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		Pediatric Admissions/ Visits to ED 2016.	Fourth grade reading proficiency rate calculated as the average for the three nearest in-district schools
All Pediatric Visits Cone ED Q4 2016	Pearson Correlation	1	-.518**
	Sig. (2-tailed)		.000
	N	164	164
Reading proficiency rate.	Pearson Correlation	-.518	1
	Sig. (2-tailed)	.000	
	N	164	164
Nonwhite	Pearson Correlation	.670	-.579
	Sig. (2-tailed)	.000	.000
	N	164	164
Foreign Born	Pearson Correlation	.060	-.217
	Sig. (2-tailed)	.448	.005
	N	164	164
poverty rate	Pearson Correlation	.556	-.390**
	Sig. (2-tailed)	.000	.000
	N	164	164
rent burden	Pearson Correlation	.106	-.162*
	Sig. (2-tailed)	.197	.047
	N	150	150
eviction rate (Eviction Lab)	Pearson Correlation	.495**	-.425**
	Sig. (2-tailed)	.000	.000
	N	164	164
Summary Ejectment Filings May 2016	Pearson Correlation	.381**	-.174*
	Sig. (2-tailed)	.000	.026
	N	164	164
Perc Bad Roof CHCS Observations	Pearson Correlation	.134	-.084
	Sig. (2-tailed)	.088	.286
	N	164	164
Perc No Gutter CHCS Observations	Pearson Correlation	.323**	-.271**
	Sig. (2-tailed)	.000	.000
	N	164	164
Perc Bad Paint CHCS Observations	Pearson Correlation	.117	-.019
	Sig. (2-tailed)	.136	.813
	N	164	164
Perc Bad Found CHCS Observations	Pearson Correlation	.109	-.080
	Sig. (2-tailed)	.164	.308
	N	164	164
**. Correlation is significant at the 0.01 level (2-tailed).			
*. Correlation is significant at the 0.05 level (2-tailed).			



Social Determinants
Housing Instability
Housing Conditions

	School Outcomes (4 th Grade reading proficiency)	Health Outcomes (pediatric respiratory visits/admissions)
	Model 1	Model 2
Constant	***	***
Non-White	***	***
Foreign Born	***	-
Poverty Rate	***	***
Rent Burdened	-	-
Eviction Rate	-	-
Summary Ejectment Filings	**	-
% Homes with Bad Roof	-	***
% Homes with No Gutters	-	-
% Homes with Bad Paint	***	***
N Code Enforcement Cases	***	-
R ²	.482 df 10 F<.0001	.535 df 10 F<.0001



Source: Social Determinants of Health (SDOH)

<https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>